

<http://researchcommons.waikato.ac.nz/>

Research Commons at the University of Waikato

Copyright Statement:

The digital copy of this thesis is protected by the Copyright Act 1994 (New Zealand).

The thesis may be consulted by you, provided you comply with the provisions of the Act and the following conditions of use:

- Any use you make of these documents or images must be for research or private study purposes only, and you may not make them available to any other person.
- Authors control the copyright of their thesis. You will recognise the author's right to be identified as the author of the thesis, and due acknowledgement will be made to the author where appropriate.
- You will obtain the author's permission before publishing any material from the thesis.

**How essential is the quality of the working relationship, between Probation
Officer and Client, in ensuring client compliance with community based sentences?**

A thesis
submitted in fulfilment
of the requirements for the degree
of
Master of Social Science
at
The University of Waikato
by

KERRY SWAIN



THE UNIVERSITY OF
WAIKATO
Te Whare Wānanga o Waikato

2020

Abstract

Within the field of psychology there has long been debate, between researchers and opinion makers, on how important the relationship between clients and probation officer is, in determining probation outcomes. During the 1970s' tough probation supervision practices emphasized surveillance, authority, and control to try to reduce re-offending. This management style prevailed despite the abundance of evidence to suggest such an approach did not work, rather it increased the likelihood of recidivism. Although these practices continue in some countries, in others a more responsive, and inclusive management style has become increasingly popular within probation officers. So, does a more responsive management style better support compliance?

To answer this question, we utilised an existing dataset of 106 participants involved in "The Traumatic Brain Injury Project". We interviewed probation officers to determine the quality of the relationship they have with their supervisees. Using a mixed method design we analysed the data to ascertain what factors, if any, had an impact on probation outcomes. Lastly, we identified individual client needs, such as trauma and substance abuse, to determine whether they have any bearing on sentence compliance.

We found that the quality of the relationship between client and probation officer had no bearing on noncompliance outcomes. However, the acute factors recorded in a risk assessment tool at sentence commencement, although not predictive of non-compliance, had a bearing on probation outcomes for clients. Additionally, we found that a client's complex needs, such as mental health or homelessness did not impact on sentence compliance.

Acknowledgements

Most importantly, I wish to acknowledge my husband and children, Nathan Swain, Mia Swain and Liam Swain. Their constant love, support, and patience instilled in me the confidence I needed to arrive at the end of this work. I am sure, at times, they wondered if it would ever be finished. I am also grateful to my supervisor Professor Devon Polaschek of the University of Waikato for her oversight and support. To my friend Apriel Jolliffe-Simpson for her regular interpretations and constant faith that I would complete this work. Lastly, I would like to thank the staff of the Te Puke and Hamilton Community Corrections Offices, who willing took time out of their busy days to participate in this study. And our participants, who agreed to help bring this research to light.

Table of Contents

Acknowledgements.....	iii
List of Tables	vii
Chapter 1: Literature Review.....	1
Community Probation.....	2
Probation Officers.....	8
Working alliance in a correctional environment.....	14
Client Compliance with Community-Based Sentences	18
Community Probation Clients and Their Complex Needs	26
The Present Study	30
Chapter 2: Method	32
Background: The Traumatic Brain Injury Project	32
Sample.....	32
Data Collection	35
Risk assessment scales.	36
Procedure	38
IOMS review.	38
Relationship Inventory.	39
Variables Identified Through Data Collection.	40
Analysis Plan	43
Quantitative analysis.	43

Qualitative Analysis.	43
Chapter 3: Results of Quantitative Analyses	44
Non-Compliance and Support to Comply with Sentence	44
Examining Bivariate Relationships Between Variables	46
Regression Analyses Predicting Noncompliance	51
Chapter 4: Results of Thematic Analysis of Client Needs	53
Overview	53
Method	53
Analytical Strategy.....	54
Overall description of Raw Data.....	54
Mental Health Concerns.	56
Physical Health Concerns.....	57
Family Violence.	58
Trauma.....	58
Sentencing Outcomes.	59
Homelessness.	59
Head Injuries.	60
Substance Abuse.....	61
Cognitive Impairments.	61
Chapter 5: Discussion	62
Introduction.....	62
Key Findings	63

Practical Implications.....	69
Limitations and Directions for Future Research.....	70
References.....	72
Appendix List.....	79
Appendix A.....	79
Appendix B	81
Appendix C	82
Appendix D.....	83

List of Tables

Table 1.	Descriptive Statistics for DOC Clients Descriptive Statistics DOC Clients- Age, Roc.Roi, DRAOR Initial
Table 2.	Descriptive Statistics for DOC Clients – Demographics, Sentence Type, Sentence Severity and Risk
Table 3.	Non-Compliance Descriptions for DOC Clients on a Community-Based Sentence
Table 4.	Correlations of Non-Compliance, Demographics, Compliance History, DRAOR Scores and Probation Officer Support.
Table 5.	Correlations of Non-Compliance and Client Needs
Table 6.	Logistic Regression Predicting Non-Compliance
Table 7.	Logistic Regression Predicting Non-Compliance with Initial Acute DRAOR Scores
Table 8.	Descriptive Statistics of Needs per Client
Table 9.	Descriptive Statistics of Identified Needs for DOC Clients on a Community-Based Sentence

Chapter 1: Literature Review

A New Zealand probation officers' main priority is to manage and support clients to address their offending related needs, ensure clients remain compliant with their sentence, complete program work and mitigate any risk to the public. However, probation clients can regularly present to their probation officers with additional complex needs, such as mental health and trauma histories. These needs often take precedence and move the focus away from the offending related targets. Their probation officer is then, by default, tasked with supporting the client to navigate and overcome these obstacles to ensure they can focus on addressing their offending related needs.

Balancing clients need and client compliance with sentence management can be problematic for probation officers, particularly given legislation restrictions. Managing clients in the community require probation officers to wear multiple hats, one of supporter and one of enforcer, supporting their clients to navigate these challenges while at the same time enforcing the court order, regardless of whether these two roles conflict with each other.

Internationally, methods of managing community probation clients differ significantly. In New Zealand, in keeping with the risk, need and responsivity principles of probation client management, New Zealand probation has established practices that facilitate and create a healthy working alliance between probation officers and clients. This working alliance is thought to foster a more responsive and adaptive management style (Aarten, 2019). Current research regarding best practice when managing probation clients in the community suggests that creating a solid working relationship between the probation officer and client, will support clients to complete or remain compliant with their community-based sentences (Van Deinse et al., 2018).

While we know a substantial amount about the ideal relationship between probation officer and client, the dual roles of probation management; enforcer and supporter, what

works in probation management and best practice, we appear to know less about what role the probation officer client relationship can play in supporting clients to comply with their sentences. Instead, client compliance research has focused on individual client motivations for compliance.

With this research project, we endeavoured to determine whether the current style of responsive probation management, favoured by New Zealand Probation Officers, can support client compliance while also accounting for complex client needs? To understand this topic, we first must understand what community probation involves, what a community probation officer does and what is considered best practice concerning managing probation clients in the community.

Community Probation

The term probation, derived from the Latin word *probatio*, implies "testing" (Canton & Dominey, 2018). It suggests that a probation client undergoes testing to determine whether they have left their previous unlawful or harmful behaviours behind and are ready to be integrated safely back to the community, without supervision (Canton & Dominey, 2018). An individual serves a term of probation after being convicted of a crime in the court system. Rather than sentencing the client to a term of imprisonment, the court decides that they are suitable candidates to serve their sentences in the community for an appropriate period. Probation is part of a judicial system designed to alleviate some of the costs associated with holding people in the penal system while also allowing them to rehabilitate and make amends to their community (Canton & Dominey, 2018).

According to Lloyd et al. (2020), the term probation is applied in some jurisdictions only when referring to community sentences as alternatives to imprisonment. However, in other jurisdictions, the meaning of probation also includes the supervision of clients released from prison on parole. During probation, clients have conditions that they must follow as set

forth by the court, often supervised by a probation officer. Ordinarily, clients on probation are required to maintain behaviours that are in line with the law (Lloyd et al., 2020).

Deering (2016) explains that there are various forms of probation. The determination of the appropriate probation type is influenced by where the client will complete the probation period, regulations the client is required to meet, and programs to be completed by the client while on probation. While on probation, a client is assigned a probation officer who oversees their order or sentence and ensures they complete all associated conditions. The probation officer is tasked with ensuring that they complete the sentence while ensuring no further harm comes to the public. Probation officers and various probation officers are responsible for ensuring that the regulations, ordered by the court, are met and conducted in line with the desired outcomes (Department of Corrections, n.d.). The final decision on client completion largely depends on the probation officer's assessment of the client's performance while on probation and whether the client followed the regulations outlined at the beginning of the sentence (Van Deinse et al., 2018).

There are various types of probation dependent on the probation jurisdiction. One type is intensive probation, primarily applied for clients engaged in crime such as violent crimes, high-ranking gangs, sex offenders, and habitual offenses. In this type of probation, clients are monitored closely through intrusive forms of probation, such as GPS monitoring, home detention, and computer management (Deering, 2016). The other form of probation is standard probation. The probation clients must report to a probation officer after a designated period, such as weekly or monthly. The clients under this type of probation must meet the court-ordered conditions, such as community treatment, alcohol and drug treatment, and program work. The other type is unsupervised probation, in which a probation department or officer is not involved. The client must complete the court's order or conditions without a

probation officer being involved for a period not longer than the actual sentence itself (Canton & Dominey, 2018).

According to Deering (2016), there are standard conditions a client must undergo during their probation period. These conditions a client may be subject to include participating or remaining employed, attending an education program, living in a directed zone and report to their probation officer. Additionally, they could be required to abide by a set curfew, not leaving the area of jurisdiction, refraining from accessing their victims, and participating in activities that benefit society. Monitors or electric tags are used on the clients when probation officers must monitor their clients' movement and whereabouts on probation (Deering, 2016).

Clients can be assigned no-contact orders to prevent contact with the victims of their offending while on probation. The no contact rule is regularly applied where former partners with whom they committed the domestic violence offence against remain at risk of further harm (Canton & Dominey, 2018). Clients can also face restrictions from contacting co-defendants and other known criminals and potential victims. For example, if the client was involved in child sexual abuse, they may be prevented from contacting minors during the probation period (Deering, 2016).

Further restrictions for clients include refraining from the possession or use of drugs, alcohol, and other abused substances (Deering, 2016). They could be required to submit to drug or alcohol testing during the period of probation. In most cases, clients who undergo restrictions and rehabilitation for drugs and alcohol also undergo psychological treatments to help them find a solution to addiction (Deering, 2016). Additionally, in some cases, courts may allow clients with limited means to engage themselves in community service, substituting their probation fines. The court rules the restrictions; the probation officer supervises the client (Deering, 2016).

Community probation in New Zealand.

The nature of probation varies across countries with how it is structured and organized, how well resourced it is, and how commonly it is used (Deering, 2016.) In New Zealand, probation clients are managed by the Department of Corrections. The Department of Corrections was established in 1995 on the principles of rehabilitation and public safety (Department of Corrections, n.d.). "The Department of Corrections works to make New Zealand a better safer place by protecting the public from those who can cause harm and reducing re-offending" (Department of Corrections, n.d.).

There is a range of sentencing options available for a judge in New Zealand to apply, depending on what is appropriate to the case. However, the court must sentence a client to the least restrictive sentence, as reflected by the sentencing hierarchy, varying from imprisonment at the top end to community work at the lower end, both punitive measures. Sentences between these two extremes are typically fulfilled in the community and have a rehabilitative aspect (Department of Corrections, n.d.).

Preventative detention at the top end of the sentencing hierarchy is an indeterminate prison sentence; prisoners may be released on parole but remain managed by Corrections for the rest of their lives. If their risk level warrants, they are subject to be recalled to prison at any time (Department of Corrections, n.d.). Also, at the top end of the sentencing hierarchy are extended supervision orders. An extended supervision order is for those clients who have been convicted of a relevant violent or sexual offense, as specified by legislation. By the court, these clients are deemed to be at high risk of committing either violent or sexual offending (Department of Corrections, n.d.).

Home detention is both a punitive and rehabilitative sentence served in the client's home and electronically monitored. It requires that the client remains at the property 24 hours a day, seven days a week unless an approved absence is in place. Likewise, community

detention is a punitive sentence served in the client's home and restricts their movements during a curfew period. The curfew period often reflects their high-risk period, e.g., a drunk driver during their regular hours of alcohol use (Department of Corrections, n.d.)

Supervision is a community-based sentence requiring a client to attend rehabilitative programs to address the causes of their offending needs. Similarly, intensive supervision requires the client to complete a rehabilitative program, but is generally completed over a more extended period than supervision and can be reviewed by the judge periodically throughout the sentence (Department of Corrections, n.d.)

In addition to sentences, there are orders imposed by the court; yet the Parole Board determines the conditions a client must meet. Parole is granted by the New Zealand Parole Board who determines whether they are eligible for release and sets restrictions on how long and what restrictions the client is required to abide. At the top tier of parole orders, often for an offence of murder, a prisoner may be released on life parole and managed by the Department of Corrections for the remainder of their life. Parole is also for those prisoners released before their statutory end date with the period of parole determined by the Parole Board (Department of Corrections, n.d.). Clients who serve a short sentence of imprisonment, two years or less, are released from prison on release conditions, determined by the court, and monitored in the community for an appropriate period. (Department of Corrections, n.d.).

The Department of Corrections manages its clients in accordance with the purpose of the Sentencing Act (2002). The purpose of the sentencing act is to, hold the client to account and promote a sense of responsibility, provide for the interests of the victim, denounce the behaviour, deter similar behaviour in both the individual and the wider community, protect the community and, lastly assist the client to rehabilitate and reintegrate back into the community. If an individual is given a sentence to be served in the community, it becomes

the responsibility of community probation administer that sentence and uphold the principles of the sentencing act (Department of Corrections, n.d.).

Managing clients in the community.

Many probation jurisdictions follow the Risk Needs and Responsivity (RNR) model of correction when managing clients. The RNR model is a correctional approach that considers three essential principles, risk, needs, and responsivity (Lovins et al., 2018). Abracen and Looman (2016) advise that the RNR model uses a formula that looks at the causes, the individual factors that fuel these causes, and the best way for the client to respond to treatments that reduce recidivism. According to Judd and Lewis (2015), the RNR model makes it easier to bring out the best outcomes in a probation setting. It ensures that each client is treated differently from others based on their specific characteristics and focuses on social learning, individual behaviour and facilitates personal change to minimize criminal actions (Judd & Lewis, 2015).

The risk principle asserts that criminal behaviour can be predicted reliably, and that treatment should focus on higher-risk offenders. (Canton & Dominey, 2018). The second principle of the RNR model, the principle of need, ensures that the client's criminogenic needs are identified, considered, and targeted to reduce recidivism (Lloyd et al., 2020). The RNR needs principle incorporates eight criminogenic needs and includes employment and education level, history of antisocial behaviours, family or marital factors, antisocial peers, antisocial personality, antisocial cognitions or attitudes, and substance abuse.

Responsivity, the third principle of the RNR model, is often overlooked in research but is of no less value than the risk and need principles (Bourgon & Bonta, 2014). The responsivity principle implies that the method of correction or treatment should be in line with the ability and style through which the client can learn (Boman et al., 2019). The

responsivity principle dictates that one of a probation officer's first challenges is to create a therapeutic environment where a client's learning can be maximized (Judd & Lewis, 2015).

The RNR approach to corrections also highlights the relevance of high-quality relationships between probation officer and client, characterized by warmth, openness, empathy, respect for the client, and enthusiasm to reducing crime-causing needs (Andrews, 2011; Andrews & Bonta, 2010). The interpersonal relationship between the probation officer and the client should allow for open collaboration and ensure that the client is sufficiently engaged (Abracen and Looman, 2016).

Probation Officers

The Department of Corrections (n.d.) advises that 'Probation officers motivate and encourage clients to make positive changes in their lives and ensure they comply with their community-based sentences and orders.' Probation officers are expected to be good role models and establish an appropriate relationship with their client to help facilitate client change. Also, they are required to administer the client's court order and associated conditions to the court's satisfaction. deMichele et al. (2011) advise that while all probation officers are tasked with the same duties and responsibilities, there are two kinds of probation officers: rehabilitative-focused and punitively focused. The diverse management styles can have variable outcomes with clients.

Rehabilitative v punitive probation officers. The rehabilitative probation officer promotes rehabilitation over punishment and acts as a motivator to ensure their client reaches the mutual goal of sentence completion. The rehabilitation approach encourages the client to reform and rehabilitate back into the community and relies on motivational interviewing and appropriate treatment to match the risk level while still administering sentence conditions. This technique inspires self-achievement and re-entrance into the community and devotes

time to motivational interviewing and healing initiatives while still managing directives (DeMichele et al., 2011).

In contrast, those probation officers who take a more punitive view of client management focus heavily on punishment and retribution. They spend significantly more time on enforcing conditions and monitoring client whereabouts than focusing on rehabilitative measures. These probation officers tend to work through threats and coercion to punish the client. Commanding, manipulating, inflexible, and unfair employment of control negatively influences the clinical and criminal results (DeMichele et al., 2011).

Morash et al. (2015) investigated the effects of two probation officer relationship styles (supportiveness and punitiveness) and the influence the adopted management style had on their female clients. Data was collected from 330 women clients who were either on probation or parole and supervised by 69 probation officers. Two interviews were completed, three months apart, with the client, who discussed their circumstances and their views on the interactions they had with their probation officers. Additionally, the clients completed several measures to establish their initial vulnerabilities and their reactions to meetings with their probation officer three months apart. Probation officers were administered the revised dual role relationship inventory at the second interview with the client. The results suggest that a woman's response to supervision interactions depends on the relationship style the probation officer utilized. The more supportive probation officers elicited positive outcomes-lower anxiety and reactance and higher crime-avoidance self-efficacy; while the punitive style probation officer elicited more negative outcomes, at least in the areas of anxiety and crime-avoidance self-efficacy. This study concluded that supportive probation officers evoke more positive effects on crime avoidance (Morash et al., 2015).

Dual roles. Many probation officers hold a standard view that the relationship with their client is primarily to prevent the reoccurrence of crime by supporting their client to

complete court mandates (Aarten, 2019). However, probation officers, during the supervision and management of their clients, are also required to play a social work role. They are frequently required to ensure that their clients' community resources are secured and work with them to alter their conduct and enhance their social results (Aarten, 2019). The two roles the probation officer plays has been hypothesized to create a dual role relationship. The way probation officers perform both roles can affect the nature of their relationship with the client (Aarten, 2019).

These are often competing for responsibilities and can cause significant dilemmas for both the probation officer and the client. The tension between the two roles has been well documented throughout probation literature and described under multiple identities, care and protection, surveillance and treatment, social work, and law enforcement (Epperson et al., 2014). Given these dual roles, a working alliance between the probation officer and client can be difficult to establish as there is potential that the client could view their probation officer as part of the system that passed the client's initial judgment, and therefore the probation officer should not be trusted. This concern for clients is valid. While maintaining the supportive element of the role, the probation officer expects the client to share information pertinent to their rehabilitation, yet sharing this information could result in further punishment or limitations (Ivanoff et al., 1994). To maintain a harmonious relationship with their client, the probation officer must balance these competing demands. If the balance is not maintained, a probation officer's role can become an adversary one and cause conflict and disharmony in the relationship with their client (Epperson et al., 2014).

Aarten (2019) explains that some of these dual relationship issues can be avoided through role clarification. Role clarification between client and probation officer can contribute to building a significant relationship and ensuring that various parties' expectations and responsibilities are outlined. In managing a community-based sentence, the probation

officer should start by reviewing the client's court order (Judd & Lewis, 2015). Highlighting the requirements of the order and resultant consequences for the client if they either fail to comply with the requirements of the entire process or fails to comply with part of the process ensures both parties have a clear understanding of what needs to be achieved through the course of the sentence (Lovins et al., 2018). Such a step is crucial in community-based sentences because it ensures that both the client and the probation officer apply the required efforts to ensure that they are committed to and are aware of the entire process (Belenko et al., 2018).

Probation officer - client relationship. While the probation officer role and expectations of such have been well researched, so too has the relationship between the probation officer and client, yet the best practice is still to be agreed upon. Within psychology research, there has been an ongoing debate, between researchers and opinion-makers, on how meaningful the relationship between a probation officer and clients is. This debate encompasses how and what the probation officer client relationship contributes to the probation process and whether it influences probation outcomes (Epperson et al., 2014).

Aarten (2019) suggests that the relationship between the probation officer and client is an essential factor in determining the quality of results in client rehabilitation. While Van Deinse et al. (2018) suggest that the quality of the relationship between a client and the probation officer can influence whether a client complies with their community-based sentence, a solid and supportive relationship can increase the likelihood that the client will complete their sentence.

deMichele et al. (2011) suggest that the probation officer's qualities can play an essential role in establishing the relationship between probation officer and client. The personality attributes of the probation officer affect the relationship with the clients. Research by Brinson (2013) identified how probation officers could change their management style to

adapt to the needs of their clients. Probation officers who participated in the research assumed roles of a best friend, little brother, and an authoritarian, depending on need, to create a relationship with their client.

Similarly, research by Viglione et al. (2017) highlighted how a probation officer's communication style is essential in creating a good relationship. This study examined probation officers use of motivational and client-centred methods when working with their clients. This research established that the clients were more comfortable with motivational communication strategies employed by probation officers, compared to a more directive approach. They found that one of the most common motivational strategies effective in creating a good client-officer relationship was encouraging words. The probation officer would praise the client for completing a task or for achieving a goal. This study concluded that when motivational communication styles are utilized over a more directive style, the relationship between the probation officer and the client was better. However, they also found that while probation officers attempt to integrate motivational techniques in their interactions, directive but authoritarian strategies still dominate probation officer and client interactions (Viglione et al., (2017).

Establishing the relationship. A strong client probation officer relationship incorporates a collaborative approach. Setting the probation goals collaboratively with the client requires the probation officer to ask the client what they desire to attain while on sentence (Schwartz et al., 2017). Collaboration ensures that the probation officer's goals and those of the client align and that there are enough resources and planning time available to guarantee that these goals can be met. Additionally, in the decision-making process, the client's participation in how the probation period should be undertaken can have a positive effect on the outcomes of the probation (Van Deirse et al., 2018). Involving the client in sentence planning can also inspire client motivation and support positive change concerning

their offending behaviours (Van Deirse et al., 2018). This motivation occurs because they are being encouraged to comply in a supportive manner, and the process allows the client to own some of their probation journey (Schwartz et al., 2017).

Additionally, Deering (2016) suggests that although it is vital to establish the ground rules and expectations in sentence planning, it is not recommended to begin the community-based sentence by laying down the law. When this occurs, it can jeopardize both the working alliance and the probation process. For the best outcomes to be attained for the client, the probation officer should strive to act in the helper role rather than a law enforcement role, which can discourage the client from collaborating with probation and other stakeholders (Van Deirse et al., 2018).

There is increasing awareness that probation officers should utilize techniques that are in harmony with social learning and cognitive-behavioural theories when working with their clients. Such techniques include modelling and strengthening pro-social behaviour and educating offenders to identify connections between behaviours and thoughts (Manchak et al., 2014). Trotter (2006) suggests that pro-social modelling refers to how a probation officer can act as an excellent, motivating role model to bring out the best in their clients. The probation officer engages the client in a compassionate relationship where they actively reinforce pro-social behaviours and attitudes and discourage antisocial and criminal behaviours. Pro-social modelling and reinforcement are described by Trotter (2006) as "involving workers, identifying and being clear about the values they wish to promote, and purposefully encouraging those values through the use of praise and other rewards" (p. 23). Several factors can interfere with developing a solid relationship between client and probation officer and negatively influence client compliance with community-based sentences. One factor is the excessive demands placed on the clients concerning sentence requirements (Bowman, 2016). Additionally, depending on their abilities and the clients'

criminal needs, some clients cannot make informed decisions when the probation programs' goals are set. According to Van Deirse et al. (2018), this challenge can force the probation officer to make decisions that do not involve the client's opinions because the client's suggestion cannot bring meaningful results. The client not being involved in the decision-making process could limit the client's chances of owning the correction programs, which may increase the risk of recidivism (Bowman, 2016).

Another concern with the probation officer client relationship is when the established relationship is excessively client-friendly, potentially limiting the seriousness with which the client takes the rehabilitation process (Belenko et al., 2018). Even if the friendly environment has many benefits, such as an engagement of the client, their commitment and ownership of the probation process may also lead to insufficient retribution and limit the impact the probation process could have on reducing recidivism (Deering, 2016).

In recent years there has been an increase in research concerning whether the quality of the probation officer and client relationship is a defining aspect of whether a client will rehabilitate. Current research suggests that a therapeutic relationship, or a working alliance, between the client and the probation officer is integral in determining whether the client will complete a rehabilitative sentence Van Deirse et al., (2018).

Working alliance in a correctional environment

Van Deirse et al. (2018) suggests that the most significant effects in the probation process are achieved when the relationship between the client and the probation officer incorporates a robust therapeutic alliance (also referred to as a working alliance) and includes characteristics of enthusiasm, openness, warmth, non-blaming and collaborative communication, mutual respect, interest, and liking. Establishing a working alliance with their clients is one of the first responsibilities that community supervision probation officers are tasked with is. The concept of the working alliance originated in psychoanalytic theory

and is now considered an essential element of most theoretical orientations. Given that the probation officer role often incorporates a social work or therapy element, it is valuable to understand what a working alliance is and how it could function in a correctional setting.

A therapeutic alliance refers to the relationship between a healthcare professional and a client. Flaskas and Perlesz (2018) suggest that the therapeutic alliance or therapeutic relationship can be defined as a collaborative bond between a client and a therapist. Although probation officers are not healthcare professionals, the social work aspect creates an atmosphere for a therapeutic bond to be established. In 1979, Edward S. Bordin developed an approach known as a therapeutic alliance, also referred to as a working alliance, which assesses and provides an understanding of the impacts of a working alliance across settings (Altimir et al., 2017).

Three main elements contribute to a working alliance. The first element, 'tasks,' is what the therapist and client agree to need to reach the client's goals (Flaskas & Perlesz, 2018). The second, 'goals,' describes the outcomes that both parties agreed upon to form the therapy targets (Flaskas & Perlesz, 2018). Third, 'bonds,' the bond forms from the trust and confidence that completing the tasks will bring the client closer to obtaining their goals (Flaskas & Perlesz, 2018).

Jeglic & Calkins (2018) suggest that "while we know quite a lot about what makes a good therapist in general, we know substantially less about characteristics of effective therapists who work with clients involved in the criminal justice system (p. 112)".

Researchers appear to have different opinions about the effectiveness of a working alliance within a correction setting. Jeglic & Calkins (2018) note that stronger alliances and more robust relationships can result in better therapeutic outcomes, while Alm (2016) suggests that a therapeutic relationship can allow the client to avoid appropriate retribution as the

enforcement actions of sentence management may be overlooked in favour of a more favourable social worker relationship.

Regardless of the debate, it is still valuable to consider the role probation officers play in supporting positive change with clients on community-based sentences through a therapeutic approach. At a minimum, a probation officer's positive relationship with the client is considered enough or, at least necessary in achieving the desired outcomes (Wormith & Zidenberg, 2018). In a study conducted by Brinson (2013), the probation officers who participated in this research spoke of the need to be dynamic, responsive, and flexible to support the relationship with their clients.

A strong working alliance between the client and the probation officer can ensure that the client is motivated to reform instead of being forced to adhere to the law (Jeglic & Calkins, 2018). In an effective working alliance, the client is directly involved in setting out the rehabilitation goals. A strong working alliance is characterized by agreement on the goals, being open to negotiation, and trust between the probation officer and the client (Morash et al., 2015). According to Alm (2016), when the probation program's goals are being set, the probation officer asks the client what they would wish to attain in the assisting aspect of community-based sentences. The goals are usually long-term and typically related directly to the probation client's criminogenic needs during the process. Involving the client in goal setting can help clients create a feeling of trust and put down the foundation for a healthy relationship, affecting the supervisees' psychosocial and criminal results (Alm, 2016).

In a rehabilitation process that utilizes a working alliance, the client is not just actively involved in goal setting for their community sentence; they also understand the goals thoroughly before the treatment starts (Wormith & Zidenberg, 2018). Additionally, the probation officer would seek to understand the client's motivation for setting their goals and why the client views the goals as necessary (Alm, 2016). In this manner, the probation officer

uses motivational interviewing aspects during the correction process so that the individual needs of the client and unique factors that led them to offend are considered during the process of rehabilitation (Alm, 2016). Therefore, using a working alliance is a crucial ingredient that matches client needs and desires with the community-based sentence requirement to have the desired outcomes for both court requirements and the client.

Flaskas and Perlesz (2018) suggest that using a working alliance relationship can also help ensure the probation officer can identify the personal attributes that could be contributing to criminal behaviours. It allows the probation officer to understand the client's criminogenic needs and what drives them to offend. Identifying client offending related needs and establishing prevention targets through a working alliance is more likely to reduce recidivism than a probation process that does not make use of a working alliance partnership (Abracen and Looman, 2016).

Although there are several ways in which the utilization of a working alliance can improve probation outcomes, the tool has its limitation (Flaskas & Perlesz, 2018). The combined goal setting between the probation officer and the client can place significant demands on the client. The client may have difficulties with problem-solving or generating options or have the means or ability to determine what change is required to leave behind a criminal lifestyle (Alm, 2016).

There is still some debate regarding whether a working alliance can support client compliance with the sentence. Deering (2016) suggests that some researchers think that a therapeutic alliance between the probation officer and client can support compliance with community-based sentencing, while others believe that therapeutic alliance makes such sentencing more difficult (Deering, 2016). Client compliance with community-based sentences can be a problematic aspect of sentence management for both the probation officer and client and given that client compliance with a sentence is integral to the successful

completion of the court order, understanding why some people comply with sentences and others do not is essential for probation officers to understand.

Client Compliance with Community-Based Sentences

For every individual serving a community-based sentence, the conditions are custom-made according to their criminal risk (Spohr et al., 2017). In order for a client to formally comply, they must be aware of all expectations of them, and the guidelines on the frequency of contact with the authorities are clear. Research shows that the purposes for why clients comply or fail to comply are multifaceted and interconnected (Bottoms, 2001). The reasons include different factors that include individual motivation, attachment to significant others, and procedural justice. Compliance by probation clients with their community-based sentences is a crucial but mostly neglected topic in criminal justice (Hucklesby, 2009).

Robinson and McNeill (2008) advise that the importance of client compliance with community-based sentences is mainly felt in the short-term or referred to as the formal dimension of compliance; the client has met all expectations requested by the court (Robinson & McNeill, 2008). In this instance, compliance regularly informs policy and procedures as measurable by attendance and completion of client expectations (Robinson & McNeill, 2008). In this regard, the probation officer plays a significant role in determining whether a client has satisfied the courts' requirement and completed probation as required (Canton & Dominey, 2018). If the client does not satisfy the terms set out by the court, the probation officer can petition the court to breach a client for non-compliant conduct. The most popular grounds for breach of action are a clients' failure to show up for scheduled meetings with no valid excuse (Robinson & McNeill, 2008). In court, the breach has to be proven, and a client failing to show up for an appointment is significantly more straightforward to prove than a lack of cooperation and or a commitment by the client to serving his sentence (Robinson & McNeill, 2008). Probation officers can also petition the

court to imprison their client or add a further community sentence. However, the probation officer must also provide compelling evidence that the client indeed violated the terms of the probation process (Belenko et al., 2018). Also, additional conditions may be placed on the client by the court, based on the probation officer's recommendation. Likewise, the client can have a sentence commuted, for good behavior, on a recommendation from the probation officer (Lloyd et al., 2020). Therefore, the opinion of the probation officer concerning client performance carries significant weight.

As suggested earlier, a strong probation officer client relationship can have many benefits. One of the benefits of this relationship includes its influence on client compliance with community-based sentences. In the probation officer client relationship, the probation officer enforces the guidelines, supervises compliance, and punishes the client for noncompliance. Research indicates that probation officers view and deliver techniques of probation monitoring establishes if the methods are efficient (Sorsby et al., 2017). Therefore, if there is a good relationship between the probation officer and the client, the clients are more likely to comply with their probation supervision requirements. When probation officers are friendly or illustrate interest, clients have been reported to portray increased compliance, and they acquire fewer warnings (Sorsby et al., 2017).

Trotter (n.d.) researched effective supervision of probation clients and practices that could encourage compliance. In this study, a group of 30 probation officers were empowered with skills such as pro-social modelling and reinforcement, role clarification, and empathy based on the premise that clients of probation officers who employ these skills have higher chances of compliance and less risk of recidivism. The study sample constituted 104 clients of the probation officers empowered with the skills and a controlled group of 157 clients with different probation officers. The study found that recidivism was lower for the experimental

group, and the use of pro-social modelling and reinforcement and role clarification corresponded to lower recidivism rates Trotter (n.d.).

Similarly, Schwartz et al. (2017) sought to determine whether client compliance is linked with the use of evidence-based motivational skills. Two hundred and twenty-eight juvenile probation officers completed the survey, and feedback from 221 was incorporated in the analysis. The results of this study indicate that probation officer support of client-focused management approaches was not associated with differential use of motivational interviewing skills. Probation officers supporting confrontational management approaches were less likely to utilize motivational interviewing skills (Schwartz et al., 2017).

Although the probation officer and client relationship can have a bearing on a client's compliance, in many instances, it comes down to an individual client to actively decide whether or not to comply. Individuals in the criminal justice system desist from breaking the law for various reasons: improved quality of life, unemployment, or family (Spohr et al., 2017). Additionally, there are several reasons as to why clients would comply or defy their community-based sentences.

Bottoms (2001) suggested that compliance is best considered in the context of both long-term compliance and short-term compliance. Long-term compliance refers to how the clients comply with the criminal law generally in terms of desisting from offending in any way. Short-term compliance refers to clients' behaviours in complying with the community sentences they are serving. In the last few years, attention in the justice system has concentrated on what will be helpful in reducing re-offending in the long term (Harper & Chitty, 2005). The criminal justice process faces several challenges in ensuring short-term compliance with sentence requirements. It is required to play the role of both minimizing re-offending and improving the effectiveness of community-based sentences.

According to Bottoms (2001), compliance relies on time and place and is mostly dynamic. The degree of compliance also varies depending on the individual. There are two varieties of short-term compliance in connection to community sentences, that is, formal and substantive. Formal compliance occurs when the client pays attention to the minimum requirements of the order. In comparison, substantive compliance happens when the client is actively involved and cooperates with the authority altogether (Bottoms, 2001). An instance where a client complies formally is when their compliance is monitored by house arrest. However, if the same client, under the same circumstances, is actively involved in criminal doings in their homes or hold parties and use illegal drugs, substantive compliance is not maintained (Hucklesby, 2009).

In addition to the degree of compliance, Bottoms (2001) suggests four motivations for why clients choose to comply: instrumental compliance, normative compliance, constraint compliance, and habit and routine. Instrumental compliance with community-based sentences suggests that clients comply since it is in their best interest (Robinson & McNeill, 2008). Clients can be assumed to be rational, and they weigh both benefits and costs of their conduct. Compliance will happen automatically when the costs overshadow the benefits of noncompliance. An essential variable in instrumental compliance is the outcome; the outcome will determine compliance (Robinson & McNeill, 2008). The severity of compliance plays a huge role in either compliance or noncompliance by an individual. However, the complicated connection between law enforcement and compliance implicates that stricter enforcement does not guarantee increased compliance (Braithwaite, 2002).

With instrumental compliance, the clients' main concern is the possible punishment for failing to comply with their sentences. The fright of the penalty for breach and consequent offences has a robust restraint effect. According to clients, how severe the possible punishment is, is a motivation for them to comply (Hucklesby, 2009). When the punishment

is going to prison, clients will opt to comply with their community-based sentence. The fear of going to prison is related to other issues, such as not wishing to leave their families behind or losing their jobs (Hucklesby, 2009). The possible consequences of the penalty they will receive alongside the fear of being incarcerated play a crucial task in motivating compliance or noncompliance.

The second motivation for compliance is normative compliance. The client's moral obligations inform moral compliance. Normative compliance has three categories that motivate compliance or noncompliance. The moral acceptance of a norm is the first category of normative compliance. The second category highlights the importance social relationships have on compliance and how significant others can influence a client's compliance. The third category is legitimacy and linked to the client's views on justice and fairness. Clients stand a higher chance of complying if they feel they have been dealt with justly and fairly. On the transverse, clients fail to comply when they feel that their sentences are unjust and unfair. Clients categorize legitimate sentences as those imposed on them by individuals or bodies with the rightful authority and are in harmony with fixed legal and procedural rules (Tyler & Huo, 2002). It is crucial for clients to feel that justice has been served if they are to comply.

The two viewpoints of legitimacy are distributive and procedural justice, and both impact compliance (Tyler & Huo, 2002). Distributive justice is about how fair an outcome is, and procedural justice is about how fair the process through which the outcome was obtained. Distributive justice is whether the outcome can be considered just and fair. The severity of the punishment imposed plays a considerable role in distributive justice. Some individuals may come to terms with unfavourable outcomes if they believe that the process involved in reaching the outcome was just and fair. The focus of procedural justice is on the conviction process. Individuals will more likely comply if they believe that the conviction process was just and fair (Hucklesby, 2009). As a result, studies have shown that compliance is influenced

by how persons in authority deal with them. Unreasonable behaviours from the persons in authority may increase the likelihood of noncompliance by clients serving community-based sentences (Hucklesby, 2009).

Bottoms (2001) proposes that the third motivation for client compliance with community-based sentences is constraint-based compliance. Constraint compliance suggests that compliance is maintained through measures that maximize clients' opportunities to comply and minimize client opportunity to re-offend. An example of a constraint is an electronically monitored order, which acts as a physical reminder to the client of the sentence they are serving (Nellis, 2006). There are physical characteristics and confines of the human body that naturally inflict constraints on a person's behaviour. An excellent example of such a constraint is the impossibility of burgling a house when one is asleep. Another constraint imposed on clients during sentencing can include requirements to attend places and avoid others at times, and avoid some behaviours that may be considered unlawful, such as a restraining order (Robinson & McNeill, 2008).

Bottoms' (2001) final motivation to comply is based on an individual's habit and routine. This motivation of compliance happens unconsciously and borrows from other sources of compliance. However, it is unclear how the connection between habit and routine and other compliance motivations are related (Bottoms, 2001). Habit may be essential to consider where an individual is constrained to a particular place; noncompliance may be evident in scenarios where the individual's habit and routine before the sentence were outside of the area they are confined to and travelling to complete their everyday routine impacts on compliance. In contrast, compliance may increase as a result of restricting regular routines and habits. Sentences can require clients to adjust their activities to fit their sentences and force clients to alter their routines. In this way, the sentences break their habits. The

disruption of the usual activities connected with criminal activities may make compliance possible (Nellis, 2006).

Like Bottoms (2001), Nellis (2006) suggests that there are different motivations for clients to comply and can be considered in the contexts of incentives, threats, surveillance, trust, and incapacitation. While there are several similarities between the two models for why clients comply, the significant differences are an expansion of instrumental compliance into incentives and threats and the additions of trust-based compliance and surveillance compliance. While Bottoms (2001) suggests that instrumental motivation influences client compliance because it is their best interest to do so, Nellis (2006) suggests that the motivation to comply is derived from using both incentives and threats to influence the compliance.

Nellis (2006) trust-based compliance is the idea that the motivation to comply is derived from a promise made to a supervisor or court. Trust is associated with contractual governance in which clients must enter contracts that dictate what they expect in exchange for their compliance (Hucklesby, 2009). If technology is applied to determine compliance or noncompliance, trust-based compliance does not often apply since it must be in place compliance or noncompliance.

Nellis (2006) proposes that surveillance-based compliance is another motivation for compliance. The take on whether one is being watched or monitored is vital to clients complying. This motivation of compliance instils some level of immediate awareness on persons being watched by authorities either continually or occasionally, from a nearby position or a distance, and where one's actions can be stored and retrieved from databases in the future (Nellis, 2006). This type of compliance is limited to instances where technology is applied at its highest level, such as electronic monitoring.

To determine compliance theories, Aarten (2019) sought to explain compliance with community probation sentences in the context of three compliance theories: deterrence

theory, procedural justice theory, and therapeutic alliance. The study employed longitudinal data from 95 probation clients to determine predictors of probation supervision compliance. The study concluded that assessed recidivism risk was not a predictor of clients' likelihood of complying. However, both deterrence methods and a pragmatic alliance with the probation officer yielded greater compliance.

Regardless of a client's attitude or motivation to comply, and the actual act of complying (behavior) can be far more complex. For instance, individuals may loathe authority but end up obeying it (Robinson & McNeill, 2008). People in authority can make the mistake of assuming consistency between attitudes and behaviors. These assumptions may result in authorities; in some instances, assuming non-compliant behavior results from the poor attitude or an act of defiance, when in reality, the client's ability to comply was outside of their means (Robinson & McNeill, 2008). This assumption can lead to the development of an oppositional perspective towards non-compliant clients resulting in more restrictive management. In turn, strict enforcement strategies may result in a shift in clients' attitudes from being slightly non-compliant to being more actively involved resisters (Robinson & McNeill, 2008). The misunderstanding between clients' attitudes and behaviors by law enforcers may create negativity between the two groups. This negativity then ends up being a motivation for noncompliance. Compliance is achieved when the two categories understand and differentiate between each group's attitudes and behaviors (Robinson & McNeill, 2008).

Much of the current research on ensuring client compliance has focused on client motivations to comply or the restrictions that can be placed on the client by the court to ensure they will comply. What has not been addressed in great detail is what outside influences can play in whether a client can comply. Does a client who has no stable housing or significant mental health concerns have the same ability to comply as a client without

similar concerns? Moreover, does a probation officer need to allow for these needs, or should the client still be expected to comply regardless?

Community Probation Clients and Their Complex Needs

Some community probation clients cope with significant daily challenges, such as high substance abuse rates, mental health, and securing basic needs such as food and shelter. Probation officers then find themselves in the position of supporting their clients to manage or overcome these needs while also supporting them to address their offending needs. These needs are often of paramount importance, especially for parolees attempting to reintegrate into society. Probation clients are a risk of re-offending if certain aspects of their lives do not change. Often the client will need more support than the probation officer is trained or available to provide. In many jurisdictions, a probation officer's sole mandate is to manage a client's offending related behaviours; therefore, probation officers are required to refer clients to the appropriate agencies, e.g., mental health services and accommodation providers, to treat and support client needs not linked to offending behaviour (Stanley, 2017).

The Department of Corrections (n.d.) instructs that "people starting a community sentence are five times more likely than the general population to have used a mental health service in the year before or after their time spent in the justice sector." This number is even higher in prisons, where more than 9 out of 10 prisoners have a history of mental illness (Department of Corrections, n.d.). According to Bowman (2016), probation clients with mental health disorders pose various challenges for probation officers and clients. First, it is often difficult for the probation officer to agree with the client on the goals, methods, and desired outcomes of a rehabilitation program. The implication of disagreeing on the process makes it difficult to initiate a supportive working alliance between the client and the probation officer.

Another challenge that a mental health disorder can pose to a probation client is the potential stigmatization attached to a mental health diagnosis (Bowman, 2016). For any individual with a mental health diagnosis, the stigma associated with such an illness can make it difficult to access appropriate services. This is often more evident for probation clients with a mental health illness; the stigma associated with criminal behaviour and mental health illness can prevent them from receiving adequate treatment or accessing required social services (Van Deinse et al., 2018).

Decisions made by probation officers concerning their clients' management can also be affected by their attitudes and perceptions towards clients with a mental health diagnosis. These perceptions can result in the probation officer applying excessive and unnecessary precautions and practices that are not appropriate for the clients (Van Deinse et al., 2018). While in some circumstances, probation officers limited understanding of mental health disorders can mean their client's symptoms are mistaken for the client's poor attitude or drug or alcohol abuse. This assumption leads to the wrong treatment measures, leading to ineffective treatment outcomes (Bowman, 2016).

According to Couloute (2018), approximately 15% of probation clients experience homelessness in the United States of America. In most cases, homeless people usually present with additional complex needs such as addiction and mental illnesses (Azuela, 2018). Cooper (2017) explains that homelessness affects the probation process because rehabilitation is hindered by the lack of appropriate housing where the client can address their offending related behaviours. One of the main challenges brought about by the client's lack of housing is that it is difficult for the probation officer to locate or track down the client when necessary or if the client's sentence requires supplementary monitoring, such as electronic monitoring, this can be impractical for a homeless client (Deering, 2016). Additionally, if a client undergoing probation is unstably housed, homeless, or living in a neighbourhood without

proper housing, the individual has a high risk of re-offending. Even in cases where the client is placed in supported accommodation for the probation period, Cooper (2017) asserts that it is likely for a homeless client to eventually return to their offending behaviours given the conditions that enabled the client to remain offense free will no longer be available to the client once their probation period is complete (Lloyd et al., 2020).

According to Lloyd et al. (2020), many adult corrections clients have a history of childhood trauma. Trauma exposure can have various long-term effects, including the manifestation of complex trauma, PTSD, or other mental disorders such as depression and anxiety, substance abuse, and interpersonal problems (Tam & Derkzen, 2014). Research shows that individuals with a history of traumatic events can be mistrustful of other people and engage in antisocial behaviours. Individuals who have encountered traumatic events such as violence, intimate partner violence, and abuse are at a higher risk of criminal offending (Lee, 2017).

Although there appears to be limited research on trauma prevalence in community-based corrections clients in New Zealand, Indig et al. (2016) report that within the New Zealand prison population, 52 percent of female prisoners and 22 percent of male prisoners meet diagnostic criteria for Post-Traumatic Stress Disorder (PTSD). Bevans (2017) advises that "there has been no causal link made between trauma and criminality. However, exposure to traumatic events causes a range of other maladaptive coping strategies, which are, in turn, associated with criminality (p. 1)." Managing a client with PTSD or complex trauma can be difficult for a probation officer as the trauma symptoms often overshadow the criminal needs.

Research suggests that the number of probation clients who engage in alcohol and drug abuse is about 66 %, while the number of incarcerated clients, on the other hand, involved with drugs and alcohol, is about 74% (Center for Substance Abuse Treatment,

2005). Alcohol and substances impact clients who are serving probation sentences. Studies show that unrelenting abstinence from drugs is related to about a 40-75 % reduction in the overall rate of crimes (Marlowe, 2003).

It is not uncommon for drug and alcohol users who are serving their sentences in the community to return to the neighbourhoods with the same bars, friends, and spots where they used to engage in substance and drug abuse unless there are restrictive conditions placed on their sentence that prevent them from attending places that encourage the continued use of substances (Marlowe, 2003). The continued use of alcohol and drugs can inhibit clients from complying with community-based sentences and increase the likelihood of re-offending (Marlowe, 2003).

As they carry out their duties, probation officers are also impacted by their clients engaging in alcohol and substance abuse. Probation officers are regularly tasked with ensuring that clients with substance abuse issues have access to appropriate services. Ensuring that clients receive adequate treatment for their addiction or substance abuse issues can be impacted by available service limiting treatment based on the clients' offending history and behaviours (Marlowe, 2003).

The symptoms associated with brain injury makes individuals more likely to become entangled in the criminal justice system. The prevalence of probation clients with brain injuries range from 12 to 82% of youths and 23 to 87% for adults (McKinlay & Albicini, 2016). At the same time, Brown et al. (2018) suggest that the general population's occurrence is about 8.5% compared to the adult offenders' population, which is about 60%. Additionally, compliance by individuals with a history of head injuries or cognitive difficulties is less than that of individuals who have no reported cognitive difficulties (McKinlay & Albicini, 2016).

Brain injuries can increase hostility and antisocial behaviour (Williams et al., 2018). Additionally, individuals with a history of head injuries are prone to suggestibility, false

confessions, and confabulation. There is also an increase in the violence levels for offenders with a history of cognitive disorders (Williams et al., 2018). Probation officers can lack confidence when managing clients who have difficulties with cognitive abilities as there can be significant uncertainty as to what the client can achieve, what the client needs may be, and what level of enforcement is required to address noncompliance (Williams et al., 2018).

Cognitive limitations are known to impact the way individuals comply with community-based sentences. It is common for individuals with head injuries to be rearrested, given they regularly have trouble, without additional support, navigating a correctional system due to their cognitive deficits. The increased rates of aggression associated with head injuries can also contribute to noncompliance by individuals serving a community-based sentence (McKinlay & Albicini, 2016).

Klein (2009) suggests that probation clients who are on sentence for a family violence offence have a 60% chance of being rearrested, for a similar offence, within six months of sentence commencement (Klein, 2009). Additionally, family violence often remains unresolved after completing the community sentence is served, similarly meaning re-offending can occur (Kelly & Johnson, 2008). Noncompliance for family violence clients, often occurs when the client is presented with a non-association order, often referred to as a no-contact order, that prevents them from having contact with their victim. Often these orders are challenging for corrections clients to navigate given that in many circumstances, the client and the victim have remained in a relationship, have shared custody arrangements or other factors that require ongoing contact with each other. Once these orders are breached, noncompliance action is likely.

The Present Study

Although from international research we have a robust understanding of what contributes to client noncompliance with community-based sentences and what typically

ensures compliance, whether this fit within a New Zealand probation context remains, to some degree, unknown. Similarly, there has been limited local research completed on the role of a New Zealand probation officer. Although international literature is abundant in research on the roles and requirements placed on Probation Officers, less is known about the role and requirements expected of a New Zealand Probation Officer.

Additionally, it is evident from the literature that a supportive and robust relationship between the probation officer and client can positively support client completion of community sentences. Although we know this works in international settings, it remains unclear, in current literature, whether a quality of the probation officer client relationship in a New Zealand context helps facilitate client compliance.

The present study has the following key objectives in mind:

1. To what extent is the relationship between probation officers and clients related to client noncompliance on community-based sentences?
2. Are there any significant factors that could predict noncompliance for clients on community-based sentences?
3. To what extent are other external factors (e.g., mental health, substance use, physical health, cognitive impairments) related to a clients' compliance with community-based sentences?
4. How do probation officers account for and manage client needs that are external to the current mandated tasks of managing a client's risk and rehabilitation?

Chapter 2: Method

Background: The Traumatic Brain Injury Project

For this current thesis we used a convenience sample from Department of Corrections Community Probation Service, using a review period of up to 12 months. For a full description of the review period please refer to the procedure section. Some of the data sourced were from “The Traumatic Brain Injury (TBI) Project”, a research study undertaken by PhD candidate Emily Norman at the University of Waikato, School of Psychology. The TBI project commenced in 2019. Data collection was completed over a twelve-month period, with the aim of increasing our understanding of whether there is any correlation between Traumatic Brain Injuries and individuals’ compliance with community-based sentences managed by Department of Corrections staff. Ethical approval was granted by the University of Waikato’s Human Ethics Committee November 2018 and full informed consent was provided by all participants prior to data collection. The participants were recruited to the TBI study through a referral from their managing Probation Officer. The managing Probation officer was advised that a study was being conducted to assess client compliance with community-based sentences, and agreed to be interviewed, both at the time of the recruitment interview, and 6 months later.

Sample

The TBI participant sample consists of 106 people who were serving community-based sentences with the Te Puke or Hamilton Community Probation Service Centres (CPS) during the period January 2019 to December 2019. The final sample size was a result of access to potential participants, their consent, and time and resource constraints of the researchers and the Department of Corrections.

Participant demographic information, which was collected at the beginning of each interview, are presented in Table 1 and Table 2. As Table 1 shows, participants ranged in age

from 18 to 66 years old with an average of 38 at the time of their interview. While table 2 shows that 77% of our sample were male ($n = 82$) and 23% were female ($n = 24$) and most participants, three quarters of our sample identified as Māori. A total of 112 sentences were being served by the participants, with sentence types ranging from Supervision to Life Parole. Many participants (49%) were serving sentences either of Intensive Supervision ($n = 31$) or Released on Conditions ($n = 25$). The average Roc*RoI score for the sample indicated an estimated 35% likelihood of returning to prison following reconviction in the next five years (Table 1).

Table 1

*Descriptive Statistics DOC Clients- Age, Roc*RoI, DRAOR Initial*

<i>Variable</i>	<i>N</i>	<i>Min</i>	<i>Max</i>	<i>Mean</i>	<i>Std. Deviation</i>
Age	106	18	66	38.27	11.52
Roc.Roi	106	.0	.86	.35	.23
DRAOR Acute (Initial)	96	0	11	5.23	2.65
DRAOR Stables (Initial)	96	1	11	6.14	2.19
DRAOR Protectives (Initial)	96	0	11	5.82	2.12

Table 2

Descriptive Statistics DOC Clients – Demographics, Sentence Type, Sentence Severity and Risk (N = 106)

<i>Variable</i>	<i>N</i>	<i>%</i>
Male	82	77.3
Female	24	22.6
<i>Client ethnicity</i>		
Australian	1	.9
New Zealand European	25	23.6
Indian	1	.9
Maori	69	65
Maori / New Zealand European	5	4.7
New Zealand European	7	6.6
Samoan / European	1	.9
Unstated	4	3.7
<i>Sentence Type</i>		
Extended Supervision	3	2.8
Life Parole	7	6.6
Parole	21	19.8
Released on Conditions	25	23.5
Home Detention	4	3.7
Intensive Supervision	31	29.2
Supervision	17	16.0
<i>Risk of Reoffending</i>		
Low	39	36.8
Medium	46	43.4
High	20	18.9
Very High	1	.9
<i>Sentence Severity</i>		
Low	17	16.0
Medium	33	31.0
High	56	52.8

Data Collection

We collected data from three sources: (a) the Traumatic Brain Injury Project (TBIP); (b) the Department of Corrections Integrated Offender Management System (IOMS); the Department's electronic database system, predominantly used by frontline staff managing clients in the community, to record and maintain current and historical sentence information; and (c) interviews with Probation Officers. Data collected from the TBIP included demographics and sentence information, length, and sentence type. From IOMS I obtained administrative data recorded by the probation officer including non-compliance information, sentence management records and any information specific to the client e.g., substance use and mental health concerns that could affect their ability to comply with their community sentence. Next, I reviewed two risk assessment scales to obtain information in relation to the clients assessed risk on their current community sentence. Finally, Probation Officer interviews were conducted at the time the client was recruited and again eight months later¹. The data I collected from these interviews included the Probation Officers' perceptions of the quality of the relationship between themselves and the client they were managing, any extra needs the client may have, any client non-compliance and whether they had specific techniques or tools they utilised to encourage or support compliance with their clients.

Administrative data collected from IOMS. Data collected from IOMS includes all sentence information, current and historical, offending history, compliance with current and historical sentences, sentence type and report information. Refer to Appendix A for a full list of information gathered.

¹ Because the TBIP archive was created collaboratively, Emily Norman collected the first tranche of Time 1 Probation officer interviews (approximately $n=8$)

Risk assessment scales. Risk assessment information from two scales is recorded on IOMS. The Dynamic Risk Assessment for Offender Re-Entry (DRAOR) is a 19-item risk assessment tool that assists probation officers in the management of their clients. For a risk assessment tool to be considered effective, it must have good internal and inter-rater reliability, face validity and a stable factor structure. Yesberg and Polaschek (2015) advise that the DRAOR has been found to reliably predict new convictions while maintaining good convergent validity with other dynamic risk instruments. Similarly, Hanby (2013) also identified support for the face validity of the DRAOR, and established it was applicable for both New Zealand European and *Māori* populations. Further, Hanby (2013) identified that over a two year follow up period, the DRAOR can add to the predictive accuracy of reconviction.

This assessment tool measures a Probation Officer's assessment, at every meaningful contact (e.g., reporting session, what else), of the client's Stable Dynamic Risk (e.g., impulse control and problem solving), Acute Dynamic Risk (i.e., substance use and anger / hostility), and Protectives factors (e.g., social support and social control) (Andrews & Bonta, 2010). The factors within each scale (e.g., risk domain) are scored on a scale of 0 to 2, with 0 being "not a problem", 1 being a "possible problem", and 2 being a "definite problem" for the individual. The protective factors are similarly measured; with a score of 0 indicating the factor is not an asset and 2 being a definite asset. Total stable risk scores range between 0 and 12, total acute risk scores range between 0 and 14, and total protective factor scores range between 0 and 12 (Polaschek & Yesberg, 2018).

With every DRAOR review probation officers allocate a level of risk based on their professional judgement: low through to very high in relation to the client's likelihood of re-offending and likelihood of causing any type of harm to someone else, before the next contact. Overall risk classifications are identified at commencement of sentence that are

indicative of the Probation Officers assessment of the clients' overall level of risk and overall level of harm; these classifications are not subject to change unless there are significant changes in a client's life (Department of Corrections, n.d.).

The second risk assessment instrument is the *Risk of Reconviction * Risk of Imprisonment (Roc*ROI)* is an actuarial risk tool employed by the Department of Corrections to support staff to make predictions about future offending of individuals they are managing. The ROC*ROI measure generates a score between 0.1 (low) to 1.0 (very high) of the likelihood that a person will be both reconvicted and then sentenced to a term of imprisonment for that offence over the following five years. The Roc*ROI is based on static factors such as personal characteristics (e.g., age and gender) and offending history (e.g., age at first offence and seriousness of previous offences) (Bakker et al., 1999). The RoC*RoI has demonstrated moderately high levels of predictive validity (AUC = 0.76; Bakker et al., 1998), confirmed over three years post-release (Nadesu, 2007).

Probation officer interviews. Much of this interview explored whether the client had remained compliant with all aspects of their sentence, both special and standard conditions, whether they were supported to comply, did they have difficulty complying, if so, what were the challenges they faced. These conversations explored whether the Probation Officer was aware of any additional challenges the client faced that could make compliance difficult.

The Dual Role Relationship Inventory (DRI-R). The DRI-R was developed to ascertain the quality of the relationship between client and supervisor while accounting for the dual roles, care and control, a supervisor is required to maintain while supervising clients (Skeem et al., 2007). The DRI-R assesses three relationship factors, including "caring and fairness," "trust", and "toughness (Kennealy et al., 2012). The DRI-R has been validated for both the general population under supervision (Kennealy et al., 2012) as well as those who are under supervision who have mental health disorders (Skeem et al., 2007). The probation

officers involved in this project had limited time available and therefore a shortened version of this tool was administered. The version utilised for this study was a version adapted by Polaschek (2016). It contains 8 of the original 30 items. Internal reliability analyses, for this shortened version identified that for Probation Officer Interviews, only the first 7 items in were internally consistent ($\alpha=.84$) and (b) for parolees, only the first 6 items were internally consistent ($\alpha=.94$). Refer to Appendix B for a list of the 8 items used.

Procedure

IOMS review. I reviewed IOMS information for a maximum period of 12 months; including 6 months prior to the recruitment of the participant or their sentence commencement date (if later) and six months post-interview or their sentence end date if earlier. Where possible the review incorporated a full 12-month period; however, in some instances where the client had just commenced sentence or were nearing the end of their sentence, they had a shorter review period. Additionally, where a client's sentence was cancelled or on hold, after a return to prison, the review of compliance stopped on the date of return to prison. Information retrieved from IOMS included, sentence information, history with the Department of Corrections, noncompliance information data, any external oversight of the client and any factors that could have a bearing on whether the client would be able to comply with their sentence or order. For a more detailed account of information collected refer to Appendix B.

The information was collected from a review of the following locations in IOMS; offender management notes screen, Provision of Advice to Court Reports, Parole Reports, Offender Plan, Offender Information screen, DRAOR screen and, conviction histories. Each of these areas is explained in more detail below:

Probation officer notes. The notes screen were perused to collect any information relevant to the clients, compliance history, engagement with the probation officer and any

extra needs that could make compliance with the sentence difficult. A detailed account of specific client notes perused, refer to Appendix C.

Provision of Advice report (PAC). A PAC is a report that assists the judge to make a fully informed and appropriate decision about which sentence a person should receive and what support should be provided to them. The probation officer writing the PAC completes an interview (where able) with the client, their immediate supports, and appropriate third-party agencies such as the New Zealand Police and Oranga Tamariki. The purpose of this report is to support an appropriate sentence recommendation to the Judge whereby the information gathered is assessed to match the person's needs, offending type and rehabilitation needs with the relevant sentence.

Parole Reports. Parole Reports are prepared by a Probation Officer, for the Parole Board, prior to a client's Parole hearing. This report details their proposed release plan and supports the Parole Board to make an informed decision in relation to whether the plan is feasible. The initial full and the most recent Parole reports were reviewed.

Offender Plan. An offender plan is completed for all clients at commencement and end of sentence and should be reviewed at least once prior to sentence end. The offender plan is an agreed document, between client and Probation Officer, of what will be completed while on sentence.

Offender Information screen. Current RoC*RoI and sentence type

DRAOR screen. Used to ascertain the overall classification of risk for both re-offending and risk of harm to others (see below for more information).

Conviction history screen. number of previous offences and type of offence(s).

Relationship Inventory. The managing Probation Officer was interviewed, by the PHD candidate, at the point of initial client referral and was recorded as relationship scale time 1. Six months post referral the same questionnaire and relationship scale were re

administered to the current managing Probation Officer and the data was recorded as relationships scale time 2. In some cases ($n = 19$, 17%) the follow up interviews could not be completed; Probation Officers had changed multiple times and the information provided would have been inconsistent ($n = 6$), the client had left the district and consent to complete the study had not been sought for the new managing district ($n = 2$), the Probation Officer had left the Department shortly before the review period ended ($n = 8$), the client had returned to prison ($n = 2$) and, first interview was not completed ($n = 1$).

Variables Identified Through Data Collection. The following variables were identified through the IOMS data review:

Noncompliance. The client was identified as not meeting at least one requirement, either special or standard conditions, of their current order or sentence, within the twelve-month review period. This variable was coded 1 if there was evidence of non-compliance, and 0 if no issues with compliance were found in the review.

Severity of sentence. Severity of sentence was rated based on the sentencing hierarchy. The hierarchy of sentences demonstrates the requirement that the court must impose the least restrictive outcome that is appropriate in the circumstances. Low severity was any sentence falling within the sentence hierarchy standard community sentencing options, Low Severity: Supervision. Medium severity was any sentence in the high severity or enhanced severity community options. These two levels were combined to create one as they were both eligible to be subject to Judicial monitoring, Medium Severity: Intensive Supervision and Home Detention. High severity covered sentences or orders falling with the incarceration or highest severity option in the sentencing hierarchy, High Severity: Life Parole, Parole, Release on Conditions, Extended Supervision Order and Preventative Detention (Department of Corrections, n.d.) Refer to Appendix D for a full description of the sentencing hierarchy as illustrated by the Department of Corrections.

Risk of conviction*Risk of imprisonment (RoC*RoI). Recorded at time of data review for each client. The Roc.Roi is recalculated at sentence start or any new convictions, and mostly remains stable throughout the period of review.

Risk of re-offending (RoR). Risk of re-offending is an overall rating score, assessed as part of the DRAOR assessment. This assessment is made by the probation officer, at the start of a client's sentence or order, and is the probation officers' opinion of how likely the client is to reoffend. These ratings normally remain stable throughout the sentence and are only subject to change if there has been a significant escalation or de-escalation in offending behaviour. For the purposes of this study the very high rating was collapsed into high.

- (1) Low
- (2) Medium
- (3) High and very high

History of non-compliance. The client was identified as not meeting any of the requirements, both special or standard conditions of any previous sentence or order.

- (0) No history of noncompliance
- (1) History of noncompliance

External oversight. The client had extra oversight, other than their probation officer. Extra oversight included: Department of Corrections High Risk Response Team management. National Office reviews, GPS monitoring, District Manager reviews and, Parole Board by means reviews of recall status. Police case manager oversight for clients on the Child Sex Offender Register. Police and / or Oranga Tamariki involvement. Mental Health Services in the form of a support worker, assisted living, medication reviews or supervised mental health accommodation. Ongoing court oversight in the form of a judicial monitoring report.

- (0) No external oversight

(1) External oversight

Dynamic Risk Assessment for Offender Re-entry (DRAOR). For this study, the DRAOR score was based on the client's initial DRAOR score was based on the client's third DRAOR during the period of their sentence (Ferguson, 2015). The first assessment was not chosen as the initial score as it can take three to four assessments for a probation officer to become familiar enough with the client to be able to accurately assess their risk. The DRAOR score was taken from previous research work completed, by Lara Wilson "Traumatic Brain Injury and Dynamic Risk" in conjunction with the TBIP. Of the 106 clients in the TBIP client list only 91 clients had the relevant DRAOR information required.

Relationship time 1. An adapted version of the Dual Role Relationship Inventory – (DRRI) was used for this study. The DRRI contains 30 items and for this study 8 of the items were utilised to allow for the limited time available from our probation officer participants. Overall score rated by the Probation Officer at time 1. Recorded at the time of the initial identification of a suitable client.

Motivational support to comply. Any recorded information, through either the IOMs review or interview with the probation officer, where it was noted the probation officer encouraged the client to comply with their sentence or order.

(0) No support

(1) Support

Reminders / support to comply. Any recorded information, through either the IOMs review or interview with the probation officer where, it was noted the probation officer reminded e.g., text the client to remind them to attend an appointment or supported the client to comply e.g., completed a home visit or arranged transport.

(0) No support

(1) Support

Threats to comply. Any recorded information, through either the IOMs review or interview with the probation officer where, it was noted the probation officer threatened the client with enforcement action or a review of their sentence or order to ensure the client complied with their sentence or order. encouraged the client to comply with their sentence or order.

(0) No support

(1) Support

Needs variables. Refer to chapter 4 client needs for detailed accounts of information entered. Needs variables were entered as:

(0) Not present

(1) Present

Support

Analysis Plan

Quantitative analysis. First, we performed descriptive statistics in SPSS version 26. Next, we explored univariate relationships between variables using Pearson correlations. Then we used Binary Logistics Regression to predict noncompliance.

Qualitative Analysis. We used thematic analysis to examine patterns present within Probation Officer interviews and IOMS records. These patterns related to the potential reasons for non-compliance through the eyes of Probation Officers and the actions or allowances made by Probation Officers in response. First, we scanned the notes from interviews and records to identify potential themes. Next, we highlighted sections of the text for coding. Step three involved examining the codes for potential themes. Next, we refined the themes to ensure all were relevant. Step five involved defining and naming the themes and lastly, step six involved writing up the themes.

Chapter 3: Results of Quantitative Analyses

The results from this study are displayed in two sections. Chapter 3 contains the results from our statistical analysis including Bivariate Correlation and Binary Logistic Regressions. Chapter 4 presents Client needs that have been identified through a Thematic Analysis of the data.

Non-Compliance and Support to Comply with Sentence

Of our sample roughly half of all participants had a history of noncompliance with a previous community-based sentence (refer to Table 3). However, in relation to the current sentence two thirds of our sample were non-compliant. Probation Officer responses in relation to client non-compliant ranged from no obvious action taken, using formal sanctions, such as written warnings, breach or recall to prison or informal sanctions, such as verbal warning or threats that next time more formal action would occur. Of those clients who were identified as having some form of noncompliance while on their current sentence nearly half of these clients had no action taken. For some clients, who had multiple occurrences of non-compliance a range of actions were taken such as both formal and informal sanctions. For 10% of non-compliant clients their probation officer took no action for one or more occurrences and used one or more formal sanctions in response to client non-compliance.

In addition to non-compliance data, we also reviewed three key areas that could have some bearing on client compliance, external oversight, support to comply and an identifiable client need that could influence the client's ability to comply. Instances of external oversight included, but were not limited to, supported accommodation, police case managers and mental health providers. Support to comply with sentence, included reminders such as text alerts or phone calls from the supervising probation officer. Client needs included, but was not limited to mental health, substance abuse or cognitive deficits. Of our sample, 80 clients were identified as having at least one need that could influence their ability to comply.

Table 3*Non-Compliance Descriptions for DOC Clients on a Community-Based Sentence (n = 106)*

Variable	N	%
History of non-compliance on previous sentences		
<i>Yes</i>	50	47.2
<i>No</i>	56	52.8
Non-Compliance on this Sentence		
<i>Yes</i>	70	66.1
<i>No</i>	36	33.9
Type of non-compliance		
<i>Non-Compliance with standard conditions</i>	50	53.0
<i>Non-Compliance with special conditions</i>	7	6.6
<i>Non-Compliance with special and standard conditions</i>	13	12.3
Action taken as a response to non-compliance	43	40.5
<i>No Action taken for non-compliance</i>	28	26.4
<i>Formal sanction</i>	7	6.6
<i>Informal sanction</i>	6	5.6
<i>Formal and informal sanctions</i>	6	5.6
<i>Formal sanction and no action taken</i>	4	3.7
<i>Informal sanction and no action taken</i>	17	1.6
<i>Formal Sanction, informal sanction and no action taken</i>	2	1.8
Evidence of support to comply	19	17.9
External oversight of client	41	38.7
Known needs influencing client ability to comply	80	75.5

We examined whether the quality of the relationship between client and probation officer,

Examining Bivariate Relationships Between Variables

The relationship between non-compliance on this sentence, and demographic, compliance history, DRAOR scores and probation officer support variables was investigated using the Pearson product-moment correlation co-efficient (Table. 4). There was no correlation between non-compliance and the overall outcome scores of the DDRI, as assessed by the Probation Officer, at time 1. There was a small positive correlation between non-compliance and the initial Acute DRAOR assessment as, $r = .235, n = 78, p < .001$, Additionally there was a small negative correlation between non-compliance and sentence severity, $r = -.277, n = 78, p < .001$. Sentence severity was coded into a dichotomous variable with low severity as the reference category. Although there were several other significant correlations between variables, no correlations were large enough to suggest that multicollinearity was a problem.

Table 4

Correlations of Non-compliance, Demographics, Relationship Time 1, Compliance History, DRAOR Scores and Probation Officer Support.

<i>Variable</i>	1	2	3	4	5	6	7	8	9	10	11	12	13	14
1.Noncompliance	1													
2. Age	-.174	1												
3. Gender	.048	.218*	1											
4. Sentence Severity	-.227*	.305**	.191	1										
5. Roc.Roi	.119	-.209	-.241*	.233*	1									
6. Relationship T1	-.169	.097	.233*	-.144	.146	1								
7. History of noncompliance	.148	.062	.186	.201	.520**	.338**	1							
8. External oversight	-.086	.036	-.116	.195	-.067	.327**	-.052	1						
9. DRAOR Acutes	.235*	-.116	-.035	-.077	-.004	.002	.006	-.016	1					
10. DRAOR Protectives	-.055	.096	.112	.105	-.094	-.190	-.040	.001	-.197	1				
11. DRAOR Stables	.192	-.261*	-.190	.006	.246*	.314**	.097	-.006	.416**	-.550**	1			
12. Motivation support to comply	-.015	-.262*	-.418**	.005	-.103	-.144	-.027	.073	-.150	.110	.009	1		
13. Threats to comply	.109	-.088	.209	.154	.115	.097	-.108	.130	.170	.123	-.055	-.250*	1	
14. Practical support to comply	.007	-.020	.203	-.176	.033	.032	.122	-.156	.020	-.022	.030	-.414**	-.084	1

* $p < .05$, ** $p < .01$ (2 -tailed)

A further correlational analysis was completed assessing the relationship between non-compliance and client needs using the was investigated using the Pearson product-moment correlation co-efficient point biserial correlation co-efficient (Table. 5). No significant correlations were identified, and multicollinearity was not a problem. We also examined correlations between demographic, compliance history, DRAOR scores and probation officer support variables. Most correlations were very small and non-significant.

Table 5*Correlations of Non-Compliance and Client Needs*

<i>Variable</i>	1	2	3	4	5	6	7	8	9	10	11	12
1. Non-Compliance	-											
2. Need Identified	-.085	-										
3. Mental Health	.101	.392**	-									
4. Physical Health	.032	.216*	-.005	-								
5. Family Violence	.130	.228*	.124	-.141	-							
6. Trauma	-.045	.216*	.154	.093	-.032	-						
7. Sentencing Issues	.043	.131	-.148	-.081	.080	-.081	-					
8. Homeless	.006	.203	.186	.230*	-.133	-.007	.104	-				
9. Head Injury	-.145	.177	-.106	.023	.012	.023	-.067	.314**	-			
10. Substance Abuse	.121	.371**	.037	.095	.147	.014	-.016	.124	-.093	-		
11 Cognitive Impairment	-0.10	.328**	.053	-0.30	-.214*	.056	.139	.080	.136	-.040	-	
12. Total Needs Count	.105	.660**	.487**	.328**	.241*	.359**	.152	.521**	.287**	.429**	.380**	

* $p < .05$, ** $p < .01$ (2-tailed)

Most of the correlations between noncompliance and other variables were nonsignificant. We proceeded with our next planned step, which was to enter those that were significant—initial DRAOR score of acute factors and sentence severity-into binary logistic regressions to establish whether these two correlated variables, could significantly predict noncompliance.

Regression Analyses Predicting Noncompliance

Binary logistic regression was performed to assess the relationship between two variables and whether clients were non-compliant with their community-based sentences (Table. 5). The model contained two independent variables (DRAOR Acute initial and sentence severity). Sentence Severity was dummy coded with low severity as the reference category. We limited our regression to these two variables as they were identified as being significantly correlated with noncompliance through our earlier bivariate correlations. The model containing both predictors was statistically significant; $\chi^2 (2, n = 78) = 8.81, p < .001$, indicating that the model was able to distinguish between clients who were non-compliant and those who were compliant. Pseudo R^2 statistics for the model ranged between .11 (Cox and Snell R^2) and .15 (Nagelkerke R^2). As shown in Table 6, neither of the variables significantly contributed to the model suggesting that both the initial DRAOR acutes or sentence severity are not predictive of noncompliance.

Table 6

Logistic Regression Predicting Non-Compliance

Variable	B	S.E.	Wald	Df	P	Odds Ratio	Confidence Interval
DRAOR Acute Initial	.228	.117	3.780	1	.052	1.256	[0.998 – 1.580]
Low Severity sentence			4.109	2	.128		
Enhanced Severity Sentence	.843	.753	1.254	1	.263	2.323	[0.531 – 10.157]
High Severity Sentence	1.148	.605	3.602	1	.058	3.152	[0.963 – 10.314]
Constant	-.901	.640	1.983	1	.159	.406	

a. Variable(s) entered on step 1: DRAOR Acute Initial, Sentence Severity.

A further binary logistic regression was performed (Table. 6), to assess the relationship between the initial DRAOR Acute and non-compliance if sentence severity was removed from the equation. The model was statistically significant $\chi^2 (2, n = 78) = 4.51, p < .05$, indicating that the model was able to distinguish between clients who were non-compliant and those who were compliant. Pseudo R^2 statistics for the model ranged between .056 (Cox and Snell R^2) and .078 (Nagelkerke R^2). OR = 1.25 (95% CI 1.01 – 1.57), suggesting that those clients with higher acutes scores on an initial DRAOR have a 25% increase in odds of being non-compliant while on sentence.

Table 7

Logistic Regression Predicting Non-Compliance with Initial Acute DRAOR Scores

Variable	B	S.E.	Wald	Df	P	Odds Ratio	Confidence Interval
DRAOR Acute initial	.230	.114	4.100	1	.043	1.258	[1.007 – 1.572]
Constant	-.472	.580	.661	1	.416	.624	

a. Variable(s) entered on step 1: DRAOR Acute 3rd

Chapter 4: Results of Thematic Analysis of Client Needs

Overview

A thematic analysis was carried out to examine whether the additional needs of a client contribute to noncompliance while on a community-based sentence. There are several clients' needs such as mental health, cognitive deficits, and substance abuse, that probation officers account for when managing a client's community-based sentence. These needs can influence a client's ability to attend and meet the requirements of their community-based sentence.

Method

We examined descriptions of client needs, identified either through the notes screen in the Integrated Offender Management System (IOMs) or identified within the probation officer interviews we conducted for this study. Client needs were documented throughout the period of sentence. Information pertaining to need were in pre-sentence reports, individual case notes, parole reports. In some instances, there was no official documentation, and the information was obtained through the relationship interviews where the probation officer would disclose their concerns for the client. We first examined clients' notes on IOMS to identify a client's needs that would likely to contribute to difficulties complying with their sentence / order and the associated conditions. Needs were also recorded regardless of whether the probation officer linked the need to the client's ability to comply. When interviewing probation officers, we asked whether they believed their client had any significant needs that could make it difficult to comply with their sentence / order and conditions. When the same need was identified in both IOMs notes and the interview, we recorded it once. In the sections that follow, we outline the analytical strategy that was applied to these qualitative data and the key themes that were identified.

Analytical Strategy

The analysis of the IOMs notes, and probation officer interviews was conducted following the analytic steps outlined by Braun and Clarke (2006). The two data sources above served as the basis for the purposes of creating themes. First, we grouped similar needs together to create our themes. For example, all the codes referring to any substance abuse that was significant enough to impair their judgment or make compliance difficult were grouped under the theme: substance abuse. Then all the relevant coded data were collated under the identified themes to gain a sense of the “size” of the themes in the overall data set (Braun & Clarke, 2006). Third, we reviewed and refined the themes, which involved the combining of conceptually similar themes. In total 10 themes were identified and utilised to analyse client needs. Overall outcomes and specific themes are outlined in the following section.

Results

Overall description of Raw Data. Of the 106 clients in our sample, 75% of clients were identified, by their probation officer as having at least one need that influenced their ability to comply with a community-based sentence refer to table. 7. The range of needs identified per client ranged from one need through to a maximum of five. Of the 80 clients with an identified need, 66% of clients were identified as having at least two needs. The two needs most frequently identified were mental health ($n = 29$) and substance abuse ($n = 35$). Client three had five identifiable needs. His probation officer advised us that:

“If he gets on meth, he becomes more dangerous. His initial brain injury was a result of a sustained gang attack but since then he has also had a stroke that has caused more brain damage. He is homeless, has no impulse control, makes serious threats about raping and killing people, and we never know whether he will act on these threats.”

Table 8*Descriptive statistics of needs per client (n = 106)*

Needs per client	N	%
0 needs identified	27	25.5
1 need identified	26	24.5
2 needs identified	36	34
3 needs identified	10	9.4
4 needs identified	5	4.7
5 needs identified	2	1.9

The most frequently identified need for our participants, of those who met criteria had an identified need, was substance abuse, with 34% of participants having a substance abuse problem (see Table 8). This was closely followed by 29.2% of participants with mental health concerns and 27.2 % of participants with cognitive impairments.

Table 9*Descriptive statistics of identified needs for DOC Clients on community-based sentences (n = 106)*

Variable	n	%
Substance Abuse	35	33
Mental Health	31	29.2
Cognitive Impairment	29	27.3
Family Violence	13	12.2
Trauma	12	11.3
Homeless	12	11.3
Physical Health	11	10.3
Head Injury	9	8.4
Sentencing Issue	6	5.6

Mental Health Concerns. Mental health concerns ranged from any official mental health diagnoses e.g., schizophrenia or bipolar disorder, given by a medical practitioner such as a psychiatrist or psychologist, through to the probation officer suspecting an undiagnosed mental health concern such as depression and anxiety. Mental health concerns were identified in 30% of clients. Several clients were known to have significant mental health concerns and were under compulsory treatment orders: Client 58 was under a compulsory treatment order with a mental health diagnosis of Schizoid Affective and Anxiety. Additionally, this client disclosed a history of childhood trauma. The probation officer allowed their client to ‘offload’ during his report in. They used this space to discuss the trauma he had experienced, rather than focus on rehabilitative needs. The probation officer spoke of how the client needed this space to vent more than he needed a short intervention or a referral to a program. The probation officer in this instance was tailoring the client’s probation to his needs rather than his court ordered conditions of attending a program, and therefore mitigating any potential non-compliance.

In some instances, Probation Officers noted that clients with mental health concerns had difficulties with tasks such as remembering to report when required, completing special conditions, and remembering to take the required medication to support their wellbeing. The probation officer of client 45 talked about the goal of survival for their client. She identified that her client had significant comorbid disorders, including psychosis, and he was unwilling and to either take medication or engage with a mental health service. As a result of his mental health, he had been unable to maintain his accommodation and had been homeless for a considerable period. The probation officer spoke of how her goal for her client was for him to survive. She spoke of how all she hoped for was that he would attend each week, so she knew he was ok. His current circumstances made the court requirements of sentence challenging to

achieve. She described how she believed he was unable to meet the special conditions of his sentence and therefore, with manager support, chose not to enforce these conditions.

Although not meeting special conditions should, under normal circumstances, result in some form of formal action taken against the client, written warning or a breach of sentence, in this instance his probation officer could see no benefit of applying enforcement action. In her opinion such action would serve no purpose other than the client would be restricted by a further sentence. She considered that his needs would be better met by a community mental health provider.

Physical Health Concerns. Physical health difficulties were identified for 11 clients and included cancer diagnoses where ongoing inpatient treatment is required through to issues that make a client physically immobile. When the client was identified as having physical health concerns that precluded them from attending their meeting with their probation officer or programme work, probation officers accounted for this and identified other ways to ensure their client could remain compliant with sentence requirements. The probation officer of client 65 described how her client had a significant chronic health concern that intermittently reduced his mobility. When he was well enough, he would cycle to his appointments but on difficult days the probation officer would talk to him over the phone rather than enforce a face-to-face report in. Additionally, the probation officer cut back on his legislated reporting requirements, allowing for flexibility and catering to what they agreed he could achieve. Although court ordered conditions are regularly matched to rehabilitation needs and risk of re-offending, in some instances the conditions can add additional stress or pressure to the client, potentially increasing risk. Often probation officers are required to balance enforcing the conditions applied by the court to mitigate risk and risk associated with applying too much pressure on the client by expecting them, to complete all court-imposed conditions.

Family Violence. Family violence was identified in 13% of clients. Clients were either victims or perpetrators of family violence. Where the client was a victim, efforts to maintain client safety became top priority. Where their safety conflicted with sentence requirements, such as reporting to their probation officer or completing programme work, allowances were made by the probation officer by excusing attendance. Often when the client was a family violence perpetrator, with conditions to abide by a non-association orders, probation officers regularly struggled to ensure the client abided by the non-association condition. Non-compliance for family violence clients was particularly evident when it was apparent the client had remained in a relationship with the victim or in the context of shared childcare commitments. Client nine was identified as a family violence perpetrator. Her probation officer spoke of the client's obsession with her victim, highlighting safety concerns for her victim and children. Her probation officer described how her client had 'problem-solving deficits, lacked impulse control and was unresponsive to advice'. The probation officer, in this instance, attempted to encourage compliance by 'reaching out to her client'. To increase her client's motivation to comply the probation officer used the incentive of removing the non-association condition to allow access to her children as an incentive, at the agreement of the children's authorised caregiver. To achieve the removal, of the order, the client had to complete all conditions specified by the court and attend appropriate counselling. The client's goal was to have contact with her children again, the probation officer offered to work with her client in order to help her obtain this. This probation officer spoke of her management style, advising that she was flexible and would try to exhaust all options before she enforced any action. This probation officer believed her clients were more compliant and willing to engage as a result.

Trauma. Twelve probation officers either speculated that their client had a history of emotional trauma or spoke of known trauma histories. Of the trauma counts, most were

evidenced from probation officer interviews rather than IOMs notes. In these instances, the probation officer talked of their suspicion that the client had a history of trauma, and as a result their substance abuse or family violence history, resulted from these historical traumatic events. Often, the probation officers were unable to quantify the trauma with formal confirmation, rather they spoke of ‘suspected trauma’ that they had pieced together from their regular discussions with the clients. The probation officer for client 23 spoke of how they were confident their client’s mental health concerns and suicide ideation stemmed from a ‘traumatic past’. The probation officer spoke of how the client’s complex needs associated with their mental health regularly interfered with the client’s ability to comply with their sentence. She spoke of giving the client room to work on the mental health concerns rather than enforcing program conditions.

Sentencing Outcomes. Sentencing concerns relate to those clients who were deemed to be ‘sentenced off the bench’. This is a Probation Officer term for when a client has attended court, for sentencing, without a court Probation Officer present and with no pre-sentence report requested by the Judge. Often the sentence of an “off the bench” client is difficult for a probation officer to manage because the client’s needs, circumstances, and ability to comply do not match the sentence requirements. Six clients were identified, solely through case notes, where no probation officer input had been provided at the time of sentencing. Client 50 was identified as being “sentenced off the bench”. In the case note completed by a probation officer following the client’s first report into a probation officer the client was described as “confused and paranoid”. In this instance the probation officer was concerned about how much the client comprehended in relation to their requirements and responsibilities of being on sentence.

Homelessness. Twelve clients were identified as homeless. To be classified as homeless the client was required to have no fixed abode and be unable to identify any

housing that could be considered temporary or emergency accommodation. Probation officer considerations for homeless clients went beyond sentence management. They spoke of the significant time required to support these clients to meet their basic everyday needs such as food, safety, and security. Client 99 was noted to be an alcoholic, with no fixed abode, and suffering from depression. Her probation officer described the complexities she faced while working with this client. Her lack of accommodation was only resolved when she was admitted to hospital following a deterioration in her health. This client was subsequently diagnosed with a potentially life-threatening illness that will need lifelong support from medical practitioners. For the client to be physically well she was required to spend significant time in and out of hospital, making it difficult for her to regularly attend to her requirement to report to her probation officer or her sentence conditions to attend appropriate programs.

Head Injuries. In some instances, clients' head injuries were known to the probation officers and were officially documented in IOMs notes. However, a percentage of clients were judged by their probation officer to display difficulties with memory and problem solving, and the probation officer had assumed that these cognitive difficulties were related to a historical head injury, but no such injury was documented in the file. In total, probation officers had identified four clients as having a suspected head injury and five who had documented evidence of a head injury. The probation officer for client number 49 described how their client had cognitive deficits because of a head injury resulting from being attacked with a hammer 20 years previously. Since obtaining the head injury this client had difficulty with memory issues and completing everyday tasks. The client would require regular reminders from his probation officer about when he was required to report or attend a program.

Substance Abuse. Substance abuse was identified for 33% of clients, and concerns ranged from chronic alcoholism and acute alcohol use through to significant methamphetamine and other drug addictions. Some clients were judged as unable to comply with their sentence due to their chronic intoxication. Probation officers spoke of clients, with chronic substance abuse issues, who would turn up to their mandated report ins while under the influence of alcohol. For these clients to remain sober was often insurmountable. While in most instances a client who turned up intoxicated would be considered noncompliant or as having ‘failed to report’, when the clients substance abuse was significant allowances were made. Additionally, for some clients, who were unable to see that their substance abuse was an issue, encouraging them to attend a substance abuse program to address this need was difficult.

Cognitive Impairments. Cognitive impairments were a significant theme within probation officer interviews. They spoke of their concerns for clients who appear to have cognitive deficits such as problem solving, memory, impulsivity, and comprehension difficulties. When a probation officer identified a client with significant cognitive difficulty, regardless of whether there was a documented history of noncompliance, the probation officer would allow for these difficulties and provide extra support to facilitate compliance, when required. This support included text message reminders for the clients’ reporting schedule or adding all upcoming report ins to the client’s calendar. The probation officer for client 58 stated:

“his attention span is short and cognitive levels low. Getting him to go to a program is challenging because of his cognitive issues, memory issues. Additionally, his basic needs such as food, transport and housing are not being met. I need to make allowances for his challenges”.

Chapter 5: Discussion

Introduction

The current study sought to examine the quality of the working relationship between probation officers and community correction clients while considering client compliance with community-based sentences. Internationally, significant research has been undertaken, looking at how the probation officer role is enacted and how the probation officer and client relationship can influence client change and support motivation. However, there is limited research in a New Zealand context concerning whether the probation officer and client relationship have a bearing on a client remaining compliant with their community sentence. Therefore, this study attempts to bridge some of that gap.

Furthermore, we sought to determine any factors that could be predictive of community correction client noncompliance with sentences. Much of the available research concerning client compliance centres on the motivations of the client and the benefits to the client should they comply. With this research, we attempted to determine any factors, other than client motivations or restrictions, that could predict client noncompliance with community-based sentences.

In this chapter, we will discuss the key findings of this study regarding relevant prior research. We also explore the practical implications of our findings and comment on the study's limitations and directions for future research. This research contributes to the general literature on probation practice and suggests important areas for future intervention efforts. Furthermore, given the nature of its sample, the present study represents a preliminary effort to understand and identify critical needs affecting New Zealand probation clients and how community probation officers currently manage those needs.

Key Findings

Research surrounding sentence compliance has traditionally focused on individual client motivations for complying, such as instrumental compliance (in the client's best interest to comply), constraint-based compliance (restrictions that prevent noncompliance), normative (a client's moral obligation to comply) and the routines of a client (disruption to such routines can influence noncompliance); (Hucklesby, 2009). These client motivations are not predictive of noncompliance. Rather they illustrate reasons for why probation clients may comply. Three of the motivations for a client to comply are, to some degree, related to the clients' motivation. Compliance in this regard comes down to their desire and ability to complete their sentence. While the fourth takes client choice out of the matter by restricting them to a specific place for a period. However, in most instances, the client is still required to choose to comply with these restrictions by remaining in the designated area.

Less attention has been paid to whether external influences, such as care provided by external agencies and client variables such as their history of compliance on previous sentences and criminal history, impact client compliance. As such, for our first research question, we attempted to determine any factors, other than client motivations or restrictions, that could predict client noncompliance with community-based sentences.

We found no common factors that were predictive of noncompliance. We analysed numerous variables; demographics, compliance history, offending history, sentence severity, yet none of these variables could predict noncompliance. This finding suggests that we can still not specify why some clients are more likely to be compliant with their community sentence than other clients. However, we did find that scoring on the initial DRAOR assessment of acute factors was positively associated with noncompliance.

Sentence severity. Sentence severity correlated with noncompliance in a bivariate analysis; however, this finding was not significant after completing a regression. We input

the sentence severity as categorical variables with the low severity sentence types as the reference category for the regression. Our lack of findings in this regard suggests that clients on more severe sentence types such as released on conditions did not have greater odds of being identified as noncompliant than those clients on lower intensity sentences. This is an interesting finding given that clients on severer sentence types generally have a higher risk of re-offending or causing harm to others and are more likely to have had more involvement with the justice system. Those clients in this bracket are also suggested to have more chaotic lifestyles: with offending supportive behaviours, in turn, a higher risk of re-offending and less engagement with authority, and in this context, less compliance with community probation (Andrews & Bonta, 2010). Our lack of findings in this area could have been influenced by using a categorical predictor in our analysis, potentially limiting the variance in our findings.

The RNR model, a best practice model, utilised by many jurisdictions for probation management, recommends that resources are allocated to high-risk clients, those who are assessed as more likely to re-offend or cause harm to others (Canton & Dominey, 2018). Interventions and resources are aimed at this level to reduce re-offending with these high-risk clients and support more significant engagement. However, applying best practice; allocating resources to those at higher risk concerning compliance management could, in theory, be ensuring compliance. Simply, those on the more severe sentence types are monitored more closely and, therefore, more likely to be picked up for discretions. Moreover, conversely, those on lower intensity sentences have more freedom from monitoring and more opportunity to be noncompliant.

Initial acute DRAOR. We found that the acute factors on an initial DRAOR assessment were positively associated with an increase in noncompliance. Therefore, as the scoring of factors assessed as acute on the DRAOR increases, so do noncompliance odds. The acutes in a DRAOR relate to immediate needs such as substance abuse, interpersonal

relationships, and accommodation. These elements influence a client's day to day life and their ability to meet sentence requirements. Therefore, the risk noted in the acute section of a DRAOR, at sentence commencement, could also apply to the client risk of noncompliance.

Currently, the DRAOR, in a New Zealand Probation context, is not utilised to monitor compliance. Instead, most probation officers use it for what it is intended, as a tool to monitor the risk of a client re-offending or causing harm to others. Within a DRAOR, a probation officer is required to identify, for each client, the most likely scenario of how their client could re-offend and the most serious offence scenario. Traditionally probation officers have been taught not to use a breach of the sentence as the most likely event or offence to occur. This is sensible given a violation of a sentence is not classed as a new offence; instead, it is either a client's inability to meet the requirements of the sentence or a disregard for their sentence. The latter could be considered antisocial or an unwillingness to abide by the rules. Given the literature suggests antisocial attitudes influence offending behaviour, one could infer that if the client is noncompliant with their sentence, they are also likely to participate in other antisocial behaviours (Canton & Dominey, 2018).

Probation officer and client relationship. One of our key research questions was to determine whether the relationship between the client and the probation officer has any bearing on client compliance. It was evident from a literature review how little attention has been directed at addressing this subject. Current research regarding the probation officer and client relationship has focused chiefly on client motivation; the clients desire to make a pro-social change, and the qualities of probation officers who are most likely to support and effect change in their client (Hucklesby, 2009; Van Deinsen et al., 2018). There has been less research completed on how the probation officer and client working relationship can support compliance.

However, the results of this study suggest that the relationship is not predictive of client noncompliance. Although our relationship interviews highlighted how many of our probation officers felt they had strong positive relationships with their clients, this was still not suggestive that their clients would have greater compliance with their sentence. Therefore, regardless of the quality of the relationship, the probation officer - client relationship did not influence client compliance with community sentences.

The probation officer and client relationship not predicting client noncompliance is an interesting finding. International research suggests that a strong probation officer and client relationship can support positive change and successful completion of sentences, and probation officers who have characteristics of enthusiasm, openness and warmth are more likely to affect significant pro-social change than those that utilise an authoritative management style (Aarten, 2019; Van Deirse et al., 2018). At the same time, Aarten (2019) showed that a pragmatic alliance with the probation officer yielded greater client compliance with a sentence. Therefore, the more substantial the relationship, the less noncompliance. However, our findings would suggest that regardless of the quality of the relationship between probation officer and client, noncompliance remains outside of the probation officer and client relationship.

If noncompliance is independent of the probation officer and client relationship, this would suggest that regardless of forming a strong bond, the probation officer cannot avoid client noncompliance if the client is unwilling or unable to meet sentence requirements. Alternatively, the probation officer has done all they can with the relationship to avoid client noncompliance, and noncompliance that still occurs is outside of what the probation officer can influence.

Social work role and working alliance. It was evident, from this research, that community corrections clients present to their probation officers with significant needs, in

addition to their offending related needs. More than three-quarters of our participants had at least one need required to be addressed or considered: most notably substance abuse or mental health concerns. From our probation officer interviews, these needs often presented as challenges that made it difficult for the client to meet their obligations of the sentence and in some cases, function in everyday life.

Evidence collected from this aspect of our research shows that probation officers will go to great lengths to support their clients and allow for the difficulties these challenges may present to them. To some degree, it could be said that, from the probation officers' descriptions of their day-to-day tasks, their job fits naturally within the role of a social worker. Some of the duties they were required to support their clients with included finding accommodation, ensuring mental health needs were met and offering counselling resources. Aarten (2019) advises that a probation officer's relationship with their client is not just to prevent the reoccurrence of a crime during probation management. They are also required to play a social work role, and the way probation officers perform both roles can affect the nature of their relationship with the client.

The focus of many probation officers, in this study, was very much in keeping with maintaining a solid working alliance. Jeglic and Calkins (2018) advise that a strong working alliance between the client and the probation officer can support clients to make positive change and comply willingly rather than being forced to do so through legal means. It was apparent that our probation officers considered, in most cases, that they had a solid and supportive relationship with their clients. They spoke of wanting to do the best for their clients. Overall, they felt like their clients trusted them as a probation officer and would be able to ask for support if required. Many of the probation officers spoke of their management styles as being flexible. They explained that they tried to exhaust all options before they enforced any formal action because of noncompliance. They believed that flexibility

encouraged compliance, and clients would be more willing to engage as a result. (Sorsby et al., 2017) supports this view and advises that when probation officers are friendly or illustrate interest, their clients are less likely to acquire warnings or become noncompliant with a sentence.

However, the social work role, naturally responsive and supportive, in some instances, prevented probation officers from completing some of the more formal aspects of sentence management. While it was evident this support was required to ensure wellbeing, it often conflicted with the probation officer mandate to ensure offending related behaviours are targeted. Noncompliance, in many instances, appeared to be overlooked or accepted because the client's needs were more apparent or pressing. In some circumstances, it appeared that the probation officer was mitigating noncompliance by ensuring their clients remained compliant, taking the responsibility away from the client. For example, regular reminders and home visits to meet the client's needs to report or attend program work or excusing when their circumstances made it difficult to participate in their probation requirements. Deering (2016) suggests that practising in such a manner could take the probation ownership away from the client and limit the probation process's impact on reducing recidivism.

New Zealand community corrections have a key responsibility to manage offending related needs and behaviours; this involves ensuring clients remain compliant with their sentence, complete program work to address their offending needs and mitigate any risk to the public. The Department of Corrections manages clients in keeping with the purpose of sentencing. As noted, most of the purpose underlying the Sentencing Act 2002 relates to preventing further harm or offending, reparation to the victim and deterring and denouncing any similar behaviour. Only one goal of the Act refers to the rehabilitation and reintegration of the client (Department of Correction, n.d.), allowing for and managing client criminogenic needs, while overlooking noncompliance could be considered in direct contrast to these

purposes. However, should the probation officer only follow the principles of the sentencing Act 2002, client change could be limited, given other needs such as mental health and homelessness can influence offending behaviours and prevent growth. Finding the right balance of both is essential, with Aarten's (2019) study finding that both deterrence methods and a pragmatic alliance with the probation officer yield greater compliance and a reduction in offending.

Practical Implications

The results from this research suggest that we still do not fully understand why some clients, in a New Zealand probation context, comply and others do not. However, regardless of the uncertainty, a greater understanding of our risk assessment tools in the context of noncompliance could help. Probation officers could utilise DRAOR as a tool to identify those of their clients who are more likely to be noncompliant with the sentence. However, this is not a consistently reliable method of identifying all noncompliant clients, and all other factors would also need to remain stable. Instead, it offers probation officers support to help identify those clients who are more likely to be noncompliant with a sentence and ensure that appropriate planning occurs to avoid noncompliance where possible.

A comprehensive screening targeting the identification of client need at sentence commencement could help probation officers understand what challenges their clients face that could prevent them from fulfilling their sentence requirements. Although some aspects of screening are completed at the initial report-in meeting, a more comprehensive screening tool, particularly about mental health and head injuries, could establish a greater understanding of client need.

Furthermore, client need should be considered in the context of probation officer caseload allocation. The current distribution of probation officer caseloads is based on sentence type and risk of re-offending rather than the clients' specific needs. Probation

officers have fewer hours allocated to supervise clients on supervision sentences than those they supervise on released on conditions or parole. However, the client on supervision may have more significant needs or management requirements, which is not accounted for in probation officer caseloads.

Additionally, training for probation officers on managing high and complex needs clients could be of benefit. Training could be at a local level and involve ensuring probation officers know available service providers, and the processes and requirements involved in the referral process could both support the client and save the probation officer valuable time. Further, a specialised probation officer role could ensure that those clients with more significant needs are allocated to probation officers with experience in mental health and head injuries.

Limitations and Directions for Future Research

There are several limitations to this study, most notably the small sample size. We utilised a dataset from already established research, the Traumatic Brain Injury Project. This study was limited to 106 participants, and available data for all variables relating to noncompliance reduced the sample to 80 participants. Additionally, the period utilised for the TBI project was one year. With a lengthier review period, we would have been able to record noncompliance throughout the entirety of the sentence.

Within our data collection period, only limited numbers of participants completed their entire sentence within the timeframe. It would be of interest to determine how many clients complete their sentence regardless of noncompliance during the sentence. The results of this data would be valuable in determining whether noncompliance or the level of noncompliance could be utilised as a predictor for whether a client will complete their community sentence. An instance of noncompliance does not necessarily mean a client cannot go on to complete their sentence successfully.

Second, we had significant probation officer turnover within our review period. High turnover often meant that the probation officer who completed the initial interview did not manage the client for the entire review period. Therefore, the data collected in this interview was only relevant for the period they were managing the client. Probation officer management styles differ significantly, and whether the management of the client differed from probation officer to probation officer could have influenced compliance.

Third, it was apparent from these interviews that the probation officer regularly mitigated client compliance by supporting the client to comply or make allowances for non-completion of sentence conditions. In some instances, they overlooked or allowed noncompliance to go without consequence by catering to client needs and supporting them to complete the sentence to ensure no breach of sentence occurred. This mitigation of noncompliance could suggest that if clients were left to complete their sentence or orders without support, we might have seen more significant instances of noncompliance.

Lastly, we did not examine, with our probation officer participants, the context of how they completed their role or how they thought the role of a probation officer should be undertaken. The relationship interviews instead focused on obtaining the probation officers perspective concerning client compliance, influence, deterrents to compliance, how they viewed their clients and what they did to support their clients to comply. While we were able to obtain the required information, these interviews also highlighted some of the task's probation officers were completing that were potentially not in line with the probation officer job descriptions. It would be beneficial to establish a greater understanding of what a day in the life of a probation officer looks like, as this will help us understand further if and how we are mitigating noncompliance for the client. Further research in this regard should include looking at what is currently involved in the probation officer role. The position is far greater than the community corrections target of addressing offending behaviours.

References

- Aarten, P. G. (2019). Exploring Probation Supervision Compliance in the Netherlands. *Law & Contemporary Problems*, 82(1), 227.
- Abracen, J., & Looman, J. (2016). Treatment of high-risk sexual offenders : An integrated approach.
- Alm, S. S. (2016). HOPE Probation. *Criminology & Public Policy*, 15(4), 1195-1214.
- Altimir, C., Capella, C., Núñez, L., Abarzúa, M., & Krause, M. (2017). Meeting in difference: Revisiting the therapeutic relationship based on patients' and therapists' experiences in several clinical contexts. *Journal of Clinical Psychology*, 73(11), 1510–1522. <https://doi.org/10.1002/jclp.22525>
- Andrews, D.A. (2011), The impact of nonprogrammatic factors on criminal-justice interventions. *Legal and Criminological Psychology*, 16: 1-23.
- Andrews, D. A., & Bonta, J. (2010). *The psychology of criminal conduct* (5th ed.). New Providence, NJ: LexisNexis.
- Azuela, G. (2018). Development of mental health and reintegration services in the New Zealand Department of Corrections. *Practice (Wellington. 2013)*, 6(1), 13-18.
- Bakker, L., Riley, D., O'Malley, J., & New Zealand. Dept. of Corrections. (1999). *ROC, risk of reconviction : Statistical models predicting four types of re-offending*. Wellington, N.Z.]: Dept. of Corrections.
- Belenko, S., Johnson, I. D., Taxman, F. S., & Rieckmann, T. (2018). Probation staff attitudes toward substance abuse treatment and evidence-based practices. *International journal of offender therapy and comparative criminology*, 62(2), 313-333.
- Bevan, M. (2017). *New Zealand prisoners' prior exposure to trauma*. Practice: The New Zealand Corrections Journal, 5(1).

- Boman, J. H., Mowen, T. J., Wodahl, E. J., Miller, B. L., & Miller, J. M. (2019). Responding to substance-use-related probation and parole violations: Are enhanced treatment sanctions preferable to jail sanctions? *Criminal Justice Studies*, 32(4), 356-370.
- Bottoms, A. (2001). Compliance and community penalties. *Community penalties: Change and challenges*, 87-116.
- Bourgon, G., & Bonta, J. (2014). Reconsidering the responsivity principle: a way to move forward. *Federal Probation*, 78(2), 3.
- Bowman, J. (2016). Comorbid substance use disorders and mental health disorders among New Zealand prisoners. *The New Zealand Corrections Journal*, 4 (1).
- Braithwaite, J. (2002). Rewards and regulation. *Journal of law and Society*, 29(1), 12-26.
- Brinson, A. (2013). Success, Desistance, and Relationships Between Probation Officers and Probationers: A Social Work Perspective.
- Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology*, 3(2), 77-107.
- Brown, J., Luckhardt, B., Harr, D., Poser, T., & Fenrich, A. (2018). Traumatic Brain Injury (TBI): A Guide for Probation Officers. *Journal of Trauma and Treatment*, 7(1), 417.
- Canton, R., & Dominey, J. (2018). *Probation* (Second ed.).
- Center for Substance Abuse Treatment. (2005). Substance abuse treatment for adults in the criminal justice system.
- Cooper, V. (2017). No fixed abode: the continuum of policing and incarcerating the homeless. *Policing: a journal of policy and practice*, 11(1), 29-38.
- Couloute, L. (2018) Nowhere to Go: Homelessness among formerly incarcerated people. Retrieved from: <https://www.prisonpolicy.org/reports/housing.html>
- Deering, J. (2016). *Probation practice and the new penology: Practitioner reflections*. Routledge.

deMichele, M. T., Payne, B. K., & Matz, A. K. (2011). *Community Supervision Workload Considerations for Public Safety*. Lexington, KY: Council of State Governments, American Probation and Parole Association.

Department of Corrections. (n.d.). Types of Sentences. Retrieved from https://www.corrections.govt.nz/working_with_offenders/courts_and_pre-sentencing/types_of_sentences

[Department of Corrections. \(n.d.\). Retrieved from https://careers.corrections.govt.nz/home/probation-officer/](https://careers.corrections.govt.nz/home/probation-officer/)

Department of Corrections. (n.d.). Retrieved from https://www.corrections.govt.nz/resources/newsletters_and_brochures/journal/volume_3_issue_1_april_2015_desistance/practice_note_building_recovery_reducing_crime

Department of Corrections. (n.d.). Retrieved from https://www.corrections.govt.nz/resources/strategic_reports/investing_in_better_mental_health_for_offenders

Epperson, M. W., Canada, K., Thompson, J., & Lurigio, A. (2014). Walking the line: Specialized and standard probation officer perspectives on supervising probationers with serious mental illnesses. *International Journal of Law and Psychiatry*, 37(5), 473-483.

Ferguson, A. (2015). An age-old issue: Evaluating the applicability of adult criminal risk assessment tools for use with youth offenders. *Unpublished master's thesis. Victoria University of Wellington, Wellington, NZ.*

Flaskas, C., & Perlesz, A. (2018). *The Therapeutic Relationship in Systemic Therapy* (1st ed., Systemic thinking and practice series). Routledge.

- Hanby, L. J. (2013). A Longitudinal Study of Dynamic Risk, Protective Factors, and Criminal Recidivism: Change over Time and the Impact of Assessment Timing. (Unpublished doctoral dissertation). Carleton University, Ottawa, Canada
- Harper, G., & Chitty, C. (2005). The impact of corrections on re-offending: a review of 'what works', Home Office Research Study 291. *London: Home Office.*
- Hucklesby, A. (2009). Understanding offenders' compliance: A case study of electronically monitored curfew orders. *Journal of Law and Society*, 36(2), 248-271.
- Indig, D., Gear, C., and Wilhelm, K. (2016) *Comorbid substance use disorders and mental health disorders among New Zealand prisoners*, New Zealand Department of Corrections
- Ivanoff, A., Blyth, B. J., & Tripodi, T. (1994). Involuntary Clients in Social Work Practice: A Research-Based Approach. New York, NY: Aldine De Gruyter.
- Jeglic, E. L., & Calkins, C. (2018). *New Frontiers in Offender Treatment The Translation of Evidence-Based Practices to Correctional Settings* (1st ed. 2018..).
- Kelly, J. B., & Johnson, M. P. (2008). Differentiation among types of intimate partner violence: Research update and implications for interventions. *Family court review*, 46(3), 476-499.
- Kennealy, P. J., Skeem, J. L., Manchak, S. M., & Eno Loudon, J. (2012). Firm, fair, and caring officer-offender relationships protect against supervision failure. *Law and Human Behavior*, 36(6), 496-505.
- Klein, A. R. (2009). *Practical implications of current domestic violence research: For law enforcement, prosecutors and judges*. Washington, DC: Office of Justice Programs, US Department of Justice.

- Lee, R. (2017). The impact of engaging with clients' trauma stories: Personal and organizational strategies to manage probation practitioners' risk of developing vicarious traumatization. *Probation Journal*, 64(4), 372-387.
- Lloyd, C. D., Hanson, R. K., Richards, D. K., & Serin, R. C. (2020). Reassessment improves prediction of criminal recidivism: A prospective study of 3,421 individuals in New Zealand. *Psychological Assessment*, 32(6), 568-581.
- Lovins, B. K., Cullen, F. T., Latessa, E. J., & Jonson, C. L. (2018). Probation Officer as a Coach: Building a New Professional Identity. *Federal Probation*, 82(1), 13-60.
- Marlowe, D. B. (2003). Integrating substance abuse treatment and criminal justice supervision. *Science & practice perspectives*, 2(1), 4.
- McKinlay, A., & Albicini, M. (2016). Prevalence of traumatic brain injury and mental health problems among individuals within the criminal justice system. *Concussion*, 1(4), CNC25.
- Manchak, S. M., Kennealy, P. J., & Skeem, J. L. (2014). Officer-offender relationship quality matters: Supervision process as an evidence-based practice. *Perspectives*, 38(2), 56-70.
- Morash, M., Kashy, D. A., Smith, S. W., & Cobbina, J. E. (2015). The effects of probation or parole agent relationship style and women offenders' criminogenic needs on offenders' responses to supervision interactions. *Criminal Justice and Behavior*, 42(4), 412-434.
- Nadesu, A. (2007). Reconviction patterns of released prisoners: A 36-months followup analysis. Wellington, NZ: Department of Corrections.
- Nellis, M. (2006). Surveillance, rehabilitation, and electronic monitoring: Getting the issues clear. *Criminology & Public Policy*, 5(1), 103-108.

- Polaschek, D. L. (2016). Do relationships matter? Examining the quality of probation officers' interactions with parolees in preventing recidivism. *Practice (Wellington, 2013)*, 4(1), 5-9.
- Polaschek, D. L. L., & Yesberg, J. A. (2018). High-Risk Violent Prisoners' Patterns of Change on Parole on the DRAOR's Dynamic Risk and Protective Factors. *Criminal Justice and Behavior*, 45, 340-363. doi: 10.1177/0093854817739928
- Robinson, G., & McNeill, F. (2008). Exploring the dynamics of compliance with community penalties. *Theoretical Criminology*, 12(4), 431-449.
- Schwartz, K., Alexander, A. O., Lau, K. S., Holloway, E. D., & Aalsma, M. C. (2017). Motivating compliance: Juvenile probation officer strategies and skills. *Journal of Offender Rehabilitation*, 56(1), 20-37.
- Skeem, J., Eno Loudon, J., Polaschek, D., & Camp, J. (2007). Assessing relationship quality in mandated community treatment: Blending care with control. *Psychological Assessment*, 19 (4), 397-410.
- Sorsby, A., Shapland, J., & Robinson, G. (2017). Using compliance with probation supervision as an interim outcome measure in evaluating a probation initiative. *Criminology & Criminal Justice*, 17(1), 40-61.
- Spohr, S. A., Taxman, F. S., & Walters, S. T. (2017). People's reasons for wanting to complete probation: Use and predictive validity in an e-health intervention. *Evaluation and program planning*, 61, 144-149.
- Stanley, E. (2017). From care to custody: Trajectories of children in post-war New Zealand. *Youth justice*, 17(1), 57-72.
- Tam, K. & Derksen, D. (2014). *Exposure to Trauma among Women Offenders: A Review of the Literature*, Correctional Service of Canada.

- Trotter, C. (2006). *Working with Involuntary Clients: A Guide to Practice* (2nd ed.). Los Angeles, CA: Sage.
- Trotter, C. (n.d.). *Effective Supervision of Offenders*. Victoria.
- Tyler, T. R., & Huo, Y. (2002). *Trust in the law: Encouraging public co-operation with the police and courts*. Russell Sage Foundation.
- Van Deirse, T. B., Cuddeback, G. S., Wilson, A. B., & Burgin, S. E. (2018). Probation officers' perceptions of supervising probationers with mental illness in rural and urban settings. *American Journal of Criminal Justice*, 43(2), 267-277.
- Viglione, J., Rudes, D. S., & Taxman, F. S. (2017). Probation officer use of client-centered communication strategies in adult probation settings. *Journal of Offender Rehabilitation*, 56(1), 38-60.
- Williams, W. H., Chitsabesan, P., Fazel, S., McMillan, T., Hughes, N., Parsonage, M., & Tonks, J. (2018). Traumatic brain injury: a potential cause of violent crime?. *The Lancet Psychiatry*, 5(10), 836-844.
- Wormith, J. S., & Zidenberg, A. M. (2018). The historical roots, current status, and future applications of the risk-need-responsivity model (RNR). In *New Frontiers in Offender Treatment* (pp. 11-41). Springer, Cham.
- Yesberg, Julia & Polaschek, Devon. (2015). Assessing dynamic risk and protective factors in the community: examining the validity of the Dynamic Risk Assessment for Offender Re-entry. *Psychology*. 21. 10.1080/1068316X.2014.935775.

Appendix List

Appendix A

Information retrieved from IOMS included:

- current sentence type,
- current offence type,
- number of previous convictions,
- RoC*RoI,
- ROR a client's overall assessed, by the probation officer, level of risk of re-offending as classified in DRAOR (low, medium, high and very high),
- historical noncompliance with community-based sentences,
- noncompliance while on their current community-based sentence;
 - how many instances,
 - types of noncompliance at each instance,
 - whether noncompliance was with special or standard or special conditions of sentence,
 - dates of the non-compliance,
 - action taken in relation to the noncompliance: formal sanction (written warning, breach or recall), informal action (verbal warning or rescheduling), or no action taken.
- number of previous convictions,
- external oversight – Mental health services, New Zealand Police, Oranga Tamariki, community based supported accommodation providers, Judicial Monitoring reports – requested by the sentencing Judge, additional Corrections Oversight – National

Office, the Parole Board and the High-Risk Response Team and, New Zealand Police Case Managers for Child Sex Offenders and,

- known factors that could influence sentence management - history of mental health, physical health concerns, family violence, homeless. This information was collected from IOMs case notes, PAC and Parole reports and interviews with Probation Officers.

Appendix B

Relationship quality scale: Probation officer version

Response options

1	2	3	4	5	6	7
Never	Rarely	Occasionally	Sometimes	Often	Very often	Always

1. I treat _____ fairly.
2. I care about _____ as a person.
3. I take the time required to really understand _____.
4. I take all of _____'s needs into account
5. _____ seems to feel safe enough to be open and honest with me.
6. _____ seems to feel I am someone he can trust.
7. _____ seems worried that I am looking to punish him.
8. I expect _____ to do things independently, and don't help him out.

Clients completed a parallel version, rating the probation officer on the same 7-point rating scale. For example, Item 1 was "How often do you think that [your probation officer] treats you fairly?"

(Polaschek, 2016)

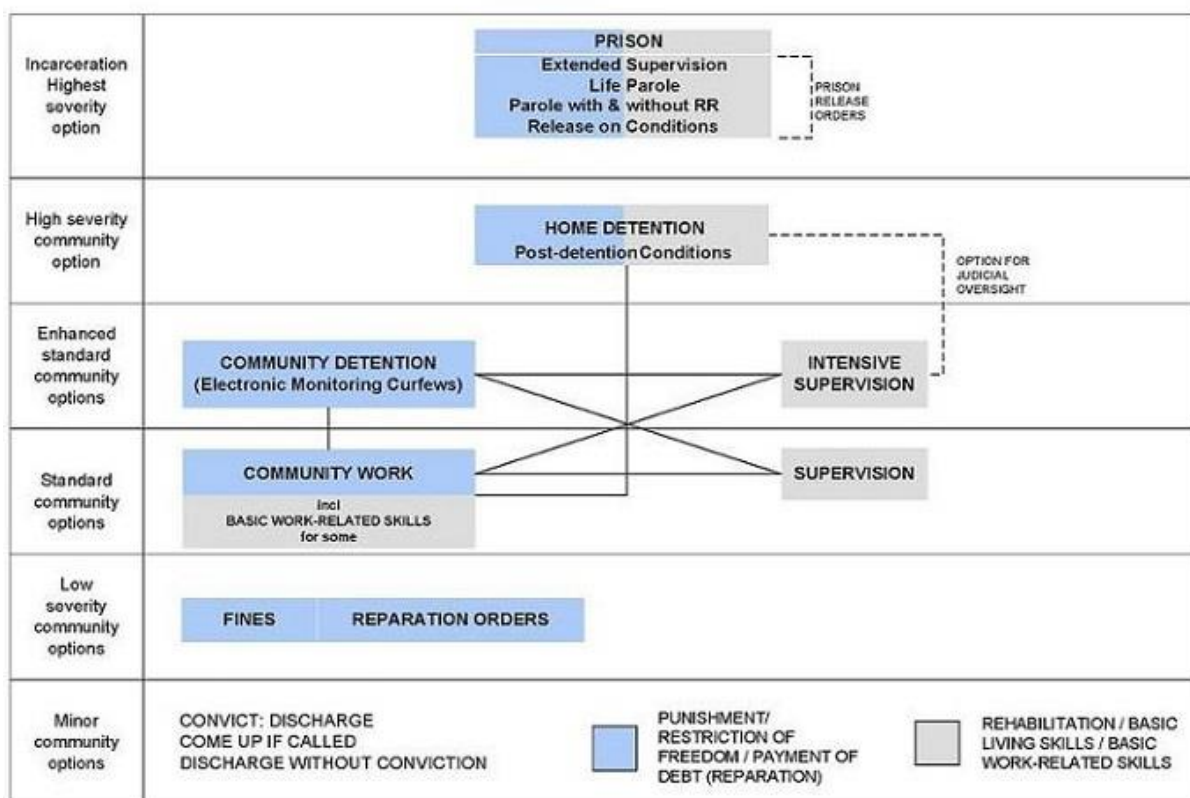
Appendix C

IOMS offender management notes

- *Failed to report or reported in late:* every scheduled report in is noted under note types; reported in, failed to report or reported in late. Report in case notes were filtered to identify both ‘failed to report’ and ‘reported in late’.
- *Noncompliance:* the nature of the non-compliance.
- *Noncompliance outcome:* records either the action that will be taken as a result of the noncompliance or actual action taken by the Probation Officer.
- *Pre-release notes:* pre-release notes record information prior to an offender’s release from Prison on either Parole or Release Information.
- *Third party contact:* this note type is used to record any information received from family, support people and, any appropriate agencies i.e., Police, Oranga Tamariki.
- *Court outcome:* the outcome of any court appearance by the client.
- *Case work:* generally used to record information specific to supporting a client. In many instances a ‘case work note’ is used to record information and client or third party has provided pertinent to the management of that sentence. In some instances, reasons for noncompliance were found in the ‘case work note’ rather than the specific ‘noncompliance’ note.

Appendix D

SENTENCING HIERARCHY



(Department of Corrections, n.d.)